

IN THE UNITED STATES DISTRICT COURT
FOR THE WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION

LUCI LEYKUM, M.D.,

Plaintiff,

v.

THE UNIVERSITY OF TEXAS
HEALTH SCIENCE CENTER AT
SAN ANTONIO,

Defendant.

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Civil Action No. 5:20-cv-00478-OLG

**APPENDIX TO DEFENDANT’S MOTION TO EXCLUDE EXPERT TESTIMONY OF DR. JANET
WILLIAMS**

Document Name	Appx. Page No.
Plaintiff’s Designation of Expert Witnesses	Appx. 1–36
Plaintiff’s Deposition of Williams	Appx. 37–65
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Defendant’s Deposition of Williams	Appx. 68–85
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PLAINTIFF'S DESIGNATION OF EXPERT WITNESSES

TO: **Defendant University of Texas Health Science Center at San Antonio**, by and through its attorneys of record: Ken Paxton, Attorney General of Texas, Brent Webster, First Assistant Attorney General, Shawn Coles, Deputy Attorney General for Civil Litigation, Thomas A. Albright, Chief, General Litigation Division, Amy S. Hilton, and Assistant Attorney General of THE OFFICE OF THE ATTORNEY GENERAL OF TEXAS, Capitol Station, P.O. Box 12548, Austin, Texas 78711-2548.

COMES NOW, Luci Leykum, M.D., Plaintiff in the above-styled and numbered cause and hereby serves her Designation of Expert Witnesses.

- (1) Kyle C. Watson
GOODE CASSEB JONES
RIKLIN CHOATE & WATSON, P.C.
2122 North Main Avenue
San Antonio, Texas 78212
Tel: (210) 733-6030
Fax: (210) 733-0330
watson@goodelaw.com

Mr. Watson may be called to testify concerning reasonable and necessary attorneys' fees for Plaintiff and rebuttal to any claims made by Defendant.

Mr. Watson will provide testimony and opinions concerning whether the attorneys' fees and expenses incurred by the parties are reasonable and necessary in the Western District of Texas. A brief summary of the basis of his opinions will be a

review of the claims in the matter, the hours, rates and work done by the attorneys involved, the time and labor required, the novelty and difficulty of the questions involved, the experience, reputation and ability of counsel, customary charges and ability of counsel, customary charges for legal services of this kind in the Western District of Texas, whether any novel or difficult questions have been presented, and any unusual time limitations involved and awards in similar-type cases.

With respect to the attorneys' fees of Plaintiff, redacted copies of the invoices for those services will be reviewed and made available for inspection and copying by the parties if they so choose.

A copy of Mr. Watson's curriculum vitae is attached hereto.

- (2) Richard G. Foster
PORTER, ROGERS, DAHLMAN & GORDON, P.C.
Managing Director
745 E. Mulberry, Suite 450
San Antonio, Texas 78212
Tel: (210) 547-9326
Fax: (210) 736-1992
rfoster@prdg.com

Mr. Foster may be called to testify concerning reasonable and necessary attorneys' fees for Plaintiff and rebuttal to any claims made by Defendant.

Mr. Foster will provide testimony and opinions concerning whether the attorneys' fees and expenses incurred by the parties are reasonable and necessary in the Western District of Texas. A brief summary of the basis of his opinions will be a review of the claims in the matter, the hours, rates and work done by the attorneys involved, the time and labor required, the novelty and difficulty of the questions involved, the experience, reputation and ability of counsel, customary charges and ability of counsel, customary charges for legal services of this kind in the Western District of Texas, whether any novel or difficult questions have been presented, and any unusual time limitations involved and awards in similar-type cases.

With respect to the attorneys' fees of Plaintiff, redacted copies of the invoices for those services will be reviewed and made available for inspection and copying by the parties if they so choose.

A copy of Mr. Foster's curriculum vitae is attached hereto.

- (3) Janet Bickel
7407 Venice Street
Falls Church, Virginia 22043
janetbickel@cox.net

Ms. Bickel is an esteemed expert in gender inequality in medicine (and other industry) and will provide testimony and opinions concerning gender bias in compensation and inequity in academic health institutions across the United States. Ms. Bickel will also provide testimony and opinions concerning the specific facts of this case, including gender bias within University of Texas Health Science Center at San Antonio and the compensation, and subsequent reduction in salary, of Dr. Leykum.

A copy of Ms. Bickel's curriculum vitae is attached hereto.

- (4) Janet Williams, M.D.
Vice Dean for Faculty – Long School of Medicine, UTHSCSA
Rosalind Hunt (Counsel for Dr. Williams)
Assistant Attorney General
Office of the Attorney General of Texas
P.O. Box 12548
Austin, Texas 7811
Tel: (512) 475-4166
Rosalind.hunt@oag.texas.gov

Dr. Williams will provide testimony and opinions concerning general gender inequities within UTHSCSA, as well as opinions regarding the status of women in the biomedical sciences. Dr. Williams will provide testimony and opinions regarding her personal knowledge of the salary inequities that have existed within UTHSCSA.

Dr. Williams will provide testimony and opinions concerning her personal familiarity with the complaints raised by Dr. Leykum, as alleged in Plaintiff's Original Complaint, as well as Dr. Leykum's work ethic, reputation, and accomplishments during Dr. Leykum's time at UTHSCSA.

Dr. Williams' testimony will include the events as referenced in Dr. Williams' November 2019 affidavit, attached hereto.

A copy of Dr. Williams' curriculum vitae has been requested and is obtainable through her counsel of record, Rosalind Hunt, of the Office of the Attorney General of Texas.

Plaintiff further reserves the right, through cross-examination or deposition, to call any expert witness identified by Defendant or any other party.

Plaintiff reserves the right to call any undesignated expert witnesses in rebuttal, whose identities and testimony cannot reasonably be foreseen until Defendant has presented its evidence at trial.

Plaintiff reserves the right to elicit expert opinions from any of the designated fact witnesses within any area as to which such person has expertise.

Respectfully submitted,

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RIKLIN CHOATE & WATSON, P.C.
2122 North Main Avenue
San Antonio, Texas 78212
Tel: (210) 733-6030
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/s/ Kyle C. Watson

Kyle C. Watson

State Bar No. 2097110

watson@goodelaw.com

Jenna C. Castleman

State Bar No. 24105583

castleman@goodelaw.com

CERTIFICATE OF SERVICE

I hereby certify that on this 26th day of January 2021, a true and correct copy of the foregoing document was served on all counsel of record via electronic mail.

/s/ Jenna C. Castleman

Jenna C. Castleman

Kyle C. Watson

GOODE CASSEB JONES
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2122 North Main Avenue
San Antonio, Texas 78212
Tel: (210) 733-6030
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Mr. Watson and his current law partners started the firm in 1991. He is a Director of the law firm and has been recognized as one of the Best Lawyers in America for the last three years and Texas Super Lawyers (2017- 2020). Mr. Watson has been practicing over 30 years, with his entire career devoted to all forms of commercial litigation, business litigation and labor and employment matters.

While attending law school, Mr. Watson competed and won every advocacy/mock trial competition, advancing to National Tournaments. As a result of his success in advocacy competitions in law school, the faculty selected and honored him with the only distinguished Lieck-Semann Award for excellence in oral advocacy. These unique experiences provided him with the solid advocacy skills necessary to represent clients in all levels of litigation. After law school, Mr. Watson began his career with a large San Antonio law firm with offices in San Antonio and Dallas. During that period, Mr. Watson tried numerous lawsuits, in both state and federal court all across Texas and the United States. He has litigated hundreds of business and employment cases involving all aspects of labor and employment matters and commercial defense issues. He routinely advises municipalities and private employers in employment/ human relations issues.

Education

Bachelor of Business Administration – Baylor University, 1982;
Juris Doctor – St. Mary’s University School of Law, 1985

Bar Admission

State Bar of Texas
U.S. District Court for the Western District of Texas
U.S. District Court for the Southern District of Texas
U.S. District Court for the Northern District of Texas

U.S. District Court for the Eastern District of Texas

U.S. Court of Appeals for the Fifth Circuit

Published Works

Garcia v. Garza, 311 S.W.3d 28 (Tex. App. San Antonio 2010, pet. denied);

Alcala v. Webb County, 625 F. Supp. 2d 391 (S.D. Tex. 2009);

Martinez v. Webb County, 2009 U. S. Dist. LEXIS 56080 (S.D. Tex. 2009);

Daniels v. Contract Land Staff, Inc., 2007 U. S. Dist. LEXIS 2673 (S.D. Tex. 2009);

Spratt v. Forward Tech. Indus., 2005 U. S. LEXIS 12027 (W.D. Tex. 2005);

Zacharie v. United States Natural Res., 94 S.W.3d 748 (Tex. App. San Antonio 2002, no pet.);

Shull v. UPS, 1999 Tex. App. LEXIS 4891 (Tex. App. CSan Antonio 1999, pet. denied).

Awards and Honors

Texas Super Lawyer (2009-2011, 2014-2015, 2017-2019) Thomson Reuters

San Antonio's Best Lawyers (2011, 2014) San Antonio Scene Magazine

Best Lawyers in America (2012-2014) Woodward/White, Inc.

American Board of Trial Advocates

Richard (Rick) G. Foster

Porter, Rogers, Dahlman & Gordon, P.C.
Managing Director

Office: San Antonio, Texas

Phone: 210-547-9326

Fax: 210-736-1992

Email: rfoster@prdg.com



Rick handles matters in a number of areas including insurance coverage, business contracts and torts, managed health care, physician credentialing and peer review, medical malpractice, products liability, general negligence, premises liability, oil and gas, land titles, construction and deceptive trade practices. Since being licensed in 1985, he has tried cases in numerous counties throughout Texas. Through this experience, he has gained a unique understanding of the pretrial and trial process in Texas which assists him in effectively assessing a client's chances of recovery or exposure.

Rick is the firm's Managing Director and is based out of the firm's San Antonio office. His recent experience includes defending HMOs in various contract and benefit disputes; suing and defending insurance carriers relating to coverage; suing and defending construction contractors relating to defective work and job performance; defending ranch owners in partition litigation; bringing suit on behalf of an oil and gas operator relating to a casing failure; suing on a breach of oil and gas lease rights relating to development of mineral interests; defending landowners in title litigation; and defending commercial real estate interests in development disputes and foreclosure proceedings. Rick is AV rated by his peers in Martindale Hubbell.

Areas of Practice

- Commercial Litigation
- Healthcare Litigation
- Personal Injury Litigation
- Insurance Litigation
- Oil & Gas Litigation
- Employment Litigation
- Healthcare Contracts
- General Business Contracts

Bar Admissions

Texas, 1985

U.S. District Court Northern District of Texas, 2000

U.S. District Court Southern District of Texas, 1986

U.S. District Court Eastern District of Texas, 2006

U.S. District Court Western District of Texas, 2000

U.S. Court of Appeals 5th Circuit, 1996

U.S. Supreme Court, 1997

Education

St. Mary's University School of Law, San Antonio, Texas

J.D. - 1985

Southern Methodist University

B.B.A., B.A. - 1982

Majors: Business, Political Science

Professional Associations and Memberships

State Bar of Texas, Sections: Litigation, Insurance and Health

San Antonio Bar Association, Sections: Litigation, Health and Natural Resources

Texas Bar Foundation, Life Fellow, 2007 - present

Texas Association of Defense Counsel, Board of Directors 2004-2005; 2016-2020

Christ Episcopal Church, 2011-2014, Member of the Vestry, Junior Warden

Ecumenical Center for Religion & Health, Board Member, 2002-08, Board Chairman, 2006-7

Karen E. Henry Foundation for Long Term Housing for Persons with Disabilities, Trustee, 1993 - 1999

St. James Episcopal School, Trustee, 1997 - 2000

Republican Party of Nueces County, Chairman, 1992 - 1994

Nueces County Young Lawyers Association, Director, 1989 – 1990

Past Employment

U.S. Congressman Kent Hance, Legislative Assistant, 1983

Classes & Seminars

- "Surviving the Integrated Healthcare Delivery System" – Speaker, 1996
- "ADA, FMLA and Workers' Compensation in Texas: Issues and Answers about Employees' Leaves of Absence and Integration Into the Workplace" – Speaker, 1999

Personal

Married 31 years to Kathleen Lee Foster; 2 adult sons; enjoys golf, skiing, fishing, hunting and bird dog training

JANET BICKEL

7407 Venice St
Falls Church, VA 22043

janetbickel@cox.net

Leadership and Career Development Coach and Consultant partnering with individuals to reach their potentials and with institutions to improve talent and leadership development.

In addition to academic health centers across North America (over 125), clients have included over 35 professional societies (such as the American Association for Cancer Research, Academic Surgical Congress, Association of Chiefs of General Internal Medicine), and diverse organizations such as United American Nurses, US Department of Commerce, and US Department of Health and Human Services.

Association of American Medical Colleges, Washington DC

1995 - 2003	Associate Vice President for Medical School Affairs; Director, Women in Medicine
1998 - 2001	Project Director, Medical School Department Chairs: Preparation, Challenges & Leadership Issues
1991 - 1995	Assistant Vice President for Institutional Planning & Development
1987 - 1991	Senior Staff Associate, Section on Institutional Studies
1978 - 1986	Staff Director, Organization of Student Representatives, Division of Academic Affairs
1985 - 1986	Project Director, Integration of Human Values Teaching Programs into Clinical Education
1982 - 1984	Special Staff to Personal Qualities, Values and Attitudes Working Group of the AAMC
	General Professional Education of the Physician Project
1977 - 1978	Staff Assistant, Division of Operational Studies

Brown University Program in Medicine, Providence, Rhode Island

1974 - 1976	Coordinator for Admissions and Financial Aid
1972 - 1974	Student Affairs Administrative Assistant

EDUCATION

M.A.	Brown University, Sociology, 1976
B.A.	University of Missouri-Columbia, English and Secondary Teaching Certification, 1971

Institute of Coaching on Leadership and Healthcare Conference, Harvard Medical School, 2013.

NTL Human Interaction Laboratory: Transforming Interpersonal Relationships, 2011

Authentic Leadership in Action's Shambhala Summer Institute, 2010

Leading Organizations to Health fellowship, Relationship Centered Health Care, 2008-9.

Courage to Lead fellowship, Relationship Centered Health Care, 2006-7.

Certification to administer:

- Myers-Briggs Type Indicator
- Center for Creative Leadership's multi-rater feedback instruments
- EQ [Emotional Intelligence] In Relationship profile [Learning-in-Action Technologies, Inc]
- Also equipped to interpret and apply the Enneagram

HONORS

Women Executives in Science & Healthcare Honorary Membership, 2012

Society for Executive Leadership in Academic Medicine International's Award for Excellence, 2002

Johns Hopkins Department of Medicine Special Recognition Award, 1997

American Medical Women's Association President's Special Recognition Award, 1993

Association of Women Surgeons, Honorary member, 1993

Phi Beta Kappa, 1971

PROFESSIONAL ACTIVITIES

Faculty and Professional Appointments

Adjunct Assistant Professor of Medical Education, George Washington University School of Medicine and Health Sciences (2003- present)
 University of Maryland School of Public Policy's Office of Executive Programs: Coaching in NIH's Senior Leadership Program and the U.S. Department of Commerce Leadership Program and co-teaching Leadership and Innovation at the CIA and the National Reconnaissance Office (2006-present)
 AAMC Mid-Career Women Faculty Professional Development Seminar (2010-2014)
 Visiting Associate Dean of Faculty, University of Wisconsin Medical School (2004-2005)
 Faculty, Executive Leadership in Academic Medicine (ELAM) Program for Women (1995-present); Learning Community Faculty Advisor (2005-08)
 Faculty, Harvard Medical School Leadership Development Program for Physicians and Scientists (2004)
 Faculty, George Washington University School of Medicine: Issues in Health Care Course (1986-1994)
 Faculty, Georgetown University Medical Center: Bioethics Problem-solving Course (1991-1993)
 Staff Director, AAMC Junior and Mid-Career Women Faculty Professional Development Seminars (1988 - 2002)
 Staff Director, AAMC Faculty Affairs Professional Development Conferences (1990-2002)
 Faculty, AAMC Management Education Program: "Systems for the Evaluation of Clinical Students: An Institutional Management Approach"(1987-1991)
 Faculty, Association of Program Directors in Internal Medicine Workshops: "The Problem Resident: Identification, Remediation and Management" (1986-1988)

Boards and Committees (since 1998)

Woman Physician Advisory Board (2008)
 Executive Leadership in Academic Medicine (ELAM) Program:
 Principal Member of the Executive Development Council (2012- present)
 Advisory Committee (1993-2006); Selection Committee (1993-2009)
 10th Anniversary Curricular Direction Task Force (2005-06)
 Macy Foundation Women and Medicine Conference, 2007
 University of Virginia Health System's Faculty Development Advisory Committee (2003-05)
 Board of Trustees, Foundation for the History of Women in Medicine (1998-2002); Chair, Awards Com. (2000-2002)
 Renew! Panel of Advisors (2001- present)
 Exhibition Planning Committee, National Library of Medicine Exhibition on the History of Women Physicians (2001-2003)
 Advisory Board, University of Southern California's Division of Medical Education (2003-2005)
 Presidential Commission on Women in Higher Education, American Council on Education (1997-2002)
 University of Virginia School of Medicine Committee on Women (2000-4)
 Society for Executive Leadership in Academic Medicine Program Planning Committee, 2002
 National Research Council's Committee on Women in Science and Engineering: Program Planning Committees for Conferences on The Role of Professional Societies in Advancing Women's Careers in Science (2000, 2002)
 AAMC's *Good Practices in the Development of the Successful Department Chair*, Editorial Board (2001-2)
 AAMC *Reporter* Editorial Board (1999-2003)
 Board of Advisors, Georgetown University Medical School Center for Mind-Body Studies (1991-present)
 Steering Committee, DHHS Substance Abuse and Mental Health Services Administration National Conference on Women (1998-99)
 Advisory Board (elected), National Academy on Women's Health Medical Education (1994-1997)
 Advisory Board, Association of Women in Science Mentoring Project (1994-98)

Editorial Service

Editorial Board: *Academic Physician and Scientist* (2005 –2010)

Ad Hoc Reviewer: *Academic Medicine* (1988 - present)
Amer. J. Obstetrics & Gynecology (2001 – 2018)
Archives of Dermatology (2008 - 2018)
Journal of Women's Health (1993-present)
Journal of General Internal Medicine (1996 – 2018)
New England Journal of Medicine (1990 - 2006)
Journal of the American Board of Family Practice (2005- 2018)
Open Medicine (2006-2018)
Pediatrics (2006- 2018)
Physical Medicine and Rehabilitation (2006- 2018)
Sex Roles (2006)
Teaching & Learning in Medicine (1993-present)
J.A.M.A. (1989 – 2002)
Journal of American Medical Women's Association (2002 – 2004)
Medical Education (2003)
The New Physician (1979 - 1989)
Journal of American Medical Women's Association (1990 – 2007)
Journal of Medical Humanities (Consulting Editor: 1996-2003)

Society Membership: Society for Executive Leadership in Academic Medicine

BIBLIOGRAPHY

Peer-Reviewed Articles

- J. Bickel, C. Sherman and T. Morgan, "Research Opportunities for Medical Students: An Approach to the Physician-Investigator Shortage," *Journal of Medical Education*, 55:567-73, 1980.
- S. Thier, D. Challoner, M. Mann, D. Skinner, V. Weldon, F. Young, J. Sherman, D. Plumb, J. Bickel and T. Morgan, "Proposals Addressing the Decline in the Training of Physician Investigators: Report of the ad hoc Committee of the AAMC," *Clinical Research*, 28:85-93, 1980.
- J. Bickel, C. Sherman and T. Morgan, "The Role of M.D.-Ph.D. Training in Increasing the Supply of Physician-Scientists," *New England Journal of Medicine*, 304:1265-68, 1981.
- P. Jolly, L. Taksel, R. Boerner, J. Bickel and C. Macenski, "U.S. Medical School Finances," *J.A.M.A.*, 248:3261-70, 1982.
- P. Jolly, L. Taksel, R. Boerner, J. Bickel and C. Macenski, "U.S. Medical School Finances," *J.A.M.A.*, 250:1524-32, 1983.
- R. Boerner and J. Bickel, "Financial Assistance for Medical Students, 1982-83," *Journal of Medical Education*, 58:973-5, 1983.
- P. Jolly, L. Taksel, P. Elliott and J. Bickel, "U.S. Medical School Finances," *J.A.M.A.*, 254:1573-4, 1985.
- J. Bickel, "Human Values Teaching Programs in the Clinical Education of Medical Students," *Journal of Medical Education*, 62:369-78, 1987.
- J. Bickel, "Women in Medical Education: A Status Report", *The New England Journal of Medicine*, 319:1579-84, 1988.
- T. Dial, J. Bickel, and A. Lewicki, "Sex Differences in Rank Attainment among Radiology and Internal Medicine Faculty," *Academic Medicine*, 64:198-202, 1989.

- J. Bickel, R. Jones, and L. Biesiadecki, "HIV/AIDS Education in U.S. Medical Schools," *Academic Medicine*, 64:552-4, 1989.
- J. Bickel, "Maternity Leave Policies for Residents: Issues and Problems," *Academic Medicine*, 64:498-501, 1989.
- S. Miles, L. Lane, J. Bickel, R. Walker and C. Cassel, "Medical Ethics Education: Coming of Age," *Academic Medicine*, 64:705-14, 1989.
- B. Whiting and J. Bickel, "Data Report: Women on Faculties of U.S. Medical Schools, 1978-1989" *Academic Medicine*, 65:277-8, 1990.
- J. Bickel, "Women Physicians: Change Agents or Second Class Citizens?", *Humane Medicine*, 6:101-5, 1990.
- J.A. Grisso, J. Bickel, and Eisenberg, J. "Parental Leave Policies for Faculty in U.S. Medical Schools," *Annals of Int. Med.*, 114:43-5, 1991.
- J. Bickel, "The Changing Faces of Promotion and Tenure at U.S. Medical Schools," *Academic Medicine*, 66:249-56, 1991.
- J. Bickel, and B. Whiting, "Data Report: Comparing the Promotion of Men and Women Faculty at U.S. Medical Schools," *Academic Medicine*, 66:497, 1991.
- J. Bickel, "Medical Students' Professional Ethics: Defining the Problems and Developing Resources," *Academic Medicine*, 66: 726-9, 1991.
- W. Levinson, K. Kaufman, and J. Bickel, "Part Time Faculty in Academic Medicine: Present Status and Future Challenges", *Annals of Internal Medicine*, 119:220-5, 1993.
- J. Bickel and P. Kopriva, "Statistical Perspective on Gender in Medicine", *J.A.M.W.A.*, 48:141-4, 1993.
- J. Bickel, "Adapting Medical Education to Restrictions on Specialty Choice", *Acad. Med.*, 69:813-5, 1994.
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- I. Philibert and J. Bickel, "Maternity and Parental Leave Policies at COTH Hospitals: An Update", *Acad. Med.*, 70:1055-8, 1995.
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- J. Bickel, editor, Proceedings of the AAMC Conference on Students' and Residents' Ethical and Professional Development, *Acad. Med.* 71: 622-42, 1996.
- J. Bickel, editor, Increasing Women's Leadership in Academic Medicine. *Acad. Med.*, 71:799-811, 1996.
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- J. Bickel, "Gender Stereotypes and Misconceptions: Unresolved Issues in Physicians' Professional

- Development," *J.A.M.A.* , 277:1405-7, 1997.
- L. Andrew and J. Bickel, "Gender Issues in Physician Career Development," *Career Planning & Adult Development Journal*, 14:105-22, 1998.
- J. Bickel and J. J. Cohen, "Improving the Environment for Women in Nephrology," *Seminars in Nephrology*", 19:95-7, 1999.
- J. Bickel, "Women in Academic Medicine," *J.A.M.W.A.* 55:10-12, 2000.
- J. Bickel and V. Clark, "Encouraging the Advancement of Women" *J.A.M.A.*, 283:1405-7, 2000.
- J. Bickel, "Gender Equity in Undergraduate Medical Education: A Status Report," *J. of Women's Health & Gender-Based Medicine*, 10: 261-70, 2001.
- M. Yedidia and J. Bickel, "Why Aren't There More Women Leaders in Academic Medicine?: The Views of Clinical Chairs", *Acad Med*, 76:453-65, 2001.
- P.Morahan and J. Bickel, "Capitalizing on Women's Intellectual Capital," *Acad Med*, 77:110-2, 2002.
- P. Morahan, J Gold, and J. Bickel, "Status of Faculty Affairs and Faculty Development Offices In U.S. Medical Schools", *Acad Med* 2002; 77:398-401.
- J. Bickel, D. Wara, B.F. Atkinson, L. S. Cohen, M. Dunn, S. Hostler, T. Johnson, P. Morahan, A.H. Rubenstein, G.F. Sheldon and E. Stokes, "Increasing Women's Leadership in Academic Medicine: Report of the AAMC Project Implementation Committee", *Acad Med*, 2002; 77:1043-61.
- J. Bickel, "Women in Academic Psychiatry," *Academic Psychiatry*, 2004; 28:285-91.
- P.Morahan, R Richman and J. Bickel. Measuring success for women physicians, dentists and scientists. *Career Planning and Adult Development J.* spring 2004;10(1):35-46.
- J. Bickel and A. Brown. "Generation X: Implications for Faculty Recruitment and Development in Academic Health Centers." *Acad Med*. 2005; 80:205-10.
- E. Frank, J. S. Carrera, T. Stratton, J. Bickel, L.M. Nora, "Belittlement and harassment experiences and their correlates among U.S. medical students." *British J. Med.* 2006;333:682-6.
- J. Bickel, "Turning Intellectual Capital into Leadership Capital: Why and How Psychiatrists Can Take the Lead." *Academic Psychiatry*. 2007; 31 (1) :1-4.
- J. Bickel, "The Role of Professional Societies in Career Development in Academic Medicine." *Academic Psychiatry*. 2007; 31 (2) :1-4.
- J. Bickel, "The Work that Remains at the Intersection of Gender and Career Development". *Arch Phys Med Rehabil*. 2007; 88:683-6.
- J. Bickel, "Career Development as a Long-Distance Hike," *J Gen Int Med*. 2009; 24:118-21.
- L. Greenberg and J. Bickel, "Teaching Scholarship and the Clinician-Educator," *Pediatric Annals*. 2010; 39: 106-11.
- J. Bickel, "Women's Career Development: What Does This Have To Do with Men?" *Annals of Surgery*, 2011: 253 (4):653-5.

- J. Bickel and S.L.Rosenthal. Difficult issues in mentoring: Recommendations on making the "undiscussable" discussable. *Acad Med.* 2011; 86:1229-34.
- J. Bickel. How can AHCs ensure that more people develop to their full potential? Focus on Improving Relational Communication Skills and Discussing What Matters Most. *Acad Med.* 2012; 87:1471-2.
- J. Bickel. Why do women hamper other women? *Journal of Women's Health*, 2014; 23:365-7.
- J. Bickel. How men can excel as mentors of women. *Acad Med.* 2014; 89:1100-02.
- M. E. Dankoski, J. Bickel, and M. E. Gusic. Discussing the Undiscussable with the Powerful: How and Why Faculty Must Learn to Counteract Organizational Silence. *Acad Med.* 2014; 89:1610-13.
- Monroe AK, Levine RB, Clark JM, Bickel J, MacDonald SM, Resar LS. Through a Gender Lens: A View of Gender and Leadership Positions in a Department of Medicine at one Academic Health Center. *J Women's Health*. 2015; 24:837-42.
- J. Bickel. Not Too Late to Reinvigorate: How Mid-career Faculty Can Continue Growing. *Acad Med.* 2016; 91:1610-13.
- J. Bickel. Hard work and talent are not enough: Mentoring and finding mentors across career stages. *OBG Management*. May 2017: SS8-11.
- J. Bickel. Organizational Savvy: Critical to Career Development in Academic Medicine. *J Women's Health*. 2019; 28:297-301.
- J. Bickel. Is Gender Equity Possible in Academic Medicine? *J Women's Health*. 2020; 29 (8). <https://www.liebertpub.com/doi/10.1089/jwh.2020.8439#>

Books/Chapters

- J. Bickel, "Women in Medical School," in *The American Woman*, 1989-90, ed. S. Rix, Washington, D.C.: Women's Research and Education Institute, 1990.
- J. Bickel, "Special Needs and Strengths of Women Medical Students," in *The Empathic Practitioner: Empathy, Gender & Medicine*, ed. Ellen More and Maureen Milligan, New Brunswick, NJ: Rutgers University Press, 1994.
- J. Bickel, "Women as Leaders in Academic Medicine" in *An Unfinished Revolution: Women and Health Care in America*, ed. Emily Friedman, NY: United Hospital Fund, 1994.
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J. Bickel "Translating Intellectual Capital into Career Capital--What a Coach can do for You." *Academic Physician and Scientist*, Sept 2006, pp 4-5.

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J. Bickel, Letter to the editor: Why It Is Smart to Facilitate Faculty Members' Resilience. *Academic Medicine*. 2009; 84:688.

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J. Bickel. Editorial: What can be done to improve the retention of clinical faculty? *J of Women's Health*. 2012.; 21: 1028-30.

J. Bickel. Editorial: Facilitating the Career and Leadership Development of Women: A Potent New Research Tool. *J of Women's Health*. 2012; 21: 1230-1.

J. Bickel, Letter to the editor: Women in Medicine: Evidence That More Evidence Is Insufficient in Effecting Improvements. *Academic Medicine*. 2017; 92:274.

INVITED PRESENTATIONS (since 2000)

Medical College of Wisconsin's Kern Institute for the Transformation of Medical Education: Grand Rounds: Resilience: What are We Learning about Achieving Career Potentials?; AWSM Workshop: Communicating in a Diverse, #MeToo World (12/19)

Johns Hopkins University School of Medicine Stanley A. Klatsky, M.D., Business of Health Care Lectureship (Plastic and Reconstructive Surgery): Adapting to Complexity: Individual and Team Strategies; workshop: Developing Your Leadership Potential: What, When, and How (10/19)

American Heart Association Research Leaders Academy: Effective Negotiation for Career-Critical Resources: Getting your Needs Met while Building Relationships (9/19)

Medical College of Georgia Department of Radiology: Talent Development for Division Chiefs; Faculty seminar: The Care and Feeding of your Career: Making Great Use of your Energies and Strengths (6/19)

Johns Hopkins University Office of Faculty Development: Communicating in a Diverse, #MeToo World. (3/19)

American Academy of Pediatrics Section on Neonatal Perinatal Medicine workshop: Hard Work and Good Intentions Aren't Enough: Mentoring and Finding Mentors across Career Stages (4/18)

University of Illinois College of Medicine's Faculty Academic Advancement Workshop: What does Career Agility Look Like?: Practices to Increase your Resilience and Success (4/18)

Mayo Medical School's Building Interdisciplinary Research Careers in Women's Health workshops: Influence without Authority: Key Skills in Leading from the Middle; Hard Work and Talent Aren't Enough: Developing Political Savvy (2/18)

University of Utah: Visiting Professor Grand Rounds: Adapting to Complexity: Practices to Increase Team and Individual Effectiveness; Increasing Women's Influence and Leadership: What have we learned and what are we learning? Education Roundtable: How Can We Get Better at Talking about the Differences that Matter Most? (11/17)

University of Kentucky College of Medicine's Faculty Development Office: Thinking like the CEO of your own Career: If your Career were a Business, would you invest in it?; Not Too Late to Reinvigorate: How Midcareer Faculty Can Keep Growing; How to Increase Your Impact as a Mentor: Recognizing and Developing Talent (10/17)

Medical University of South Carolina's Clinical and Translational Science Awards Program Mentorship Training Symposium Keynote: How to Have Difficult Conversations: Improving

your Relational Communication Skills; Workshop: Honing the Skills of Inquiry, Listening and Self-monitoring to Get Better Results (6/17)

University of Michigan: Empowering Women to Achieve Academic Success Conference Keynote: Gender, Power & Advancement: What are We Learning about how Women can Increase their Influence?(6/17)

Society of Gynecologic Surgeons Annual Scientific Meeting Keynote: Hard Work and Talent Aren't Enough: Mentoring and Finding Mentors across Career Stages (3/17)

Beeson Career Development Award Conference (National Institute on Aging/American Federation for Aging Research): Career Negotiations (11/16)

Cleveland Clinic Women in Healthcare Forum: Approaching Conflicts and Differences with Agility and Ease: Relational Communication Skills (9/16)

Partners Health Care Primary Care Leadership Summit: Preparing to Lead Change: Influencing Key Stakeholders (with Niki Steckler PhD) (9/16)

University of Texas Medical Branch Center for Addiction Research and the Diversity Council: Bridging Generational Differences to Improve Education and Faculty and Staff Development (7/16)

Vanderbilt School of Medicine Department of Pediatrics: Everyone Leads from the Middle: Shifting the Culture to Improve Collaboration and Communications (6/16)

Memorial Sloan Kettering Cancer Center: How Do You Define Success? Strategies for Getting What You Want Out of Life; Show Me A Successful Woman Who Isn't Considered "Difficult": Developing a Style that Works (6/16)

American College of Cardiology Kentucky Women in Cardiology chapter: Turning your Intellectual Capital into Career Capital (5/16)

Women in Plastic Surgery Enrichment Retreat: Power, Sex and Advancement: Applying Emerging Insights (2/16)

University of Calgary: Maximizing Your Impact as a Mentor and Creating a Culture of Mentoring Thrives; for Arts and Sciences faculty: Managing Up, Down and Across: Relational Communication; Power, Gender and Advancement: What are We Learning about how Women can Increase their Influence?; Leveraging gender diversity to maximize departmental and individual success (1/16)

American Association of Gynecologic Laparoscopists: Managing Conflicts in the Workplace; Gender-Related Issues in Medical Training (11/15)

Oregon Health and Sciences University 3rd Annual Women in Academic Medicine Conference keynote: Growing as a Leader: Enhancing your resilience and influence (10/15)

Kansas University Medical Center Inter-Professional Leadership Conference Cultivating "You, Inc." Workshops: The Art of Self-Promotion: Tooting Your Own Horn without Blowing It; and Show Me a Successful Woman Who Isn't Considered "Difficult": Developing a Style that Works (8/15)

Queens University Department of Psychiatry's Faculty Development series: Maximizing Your Impact as a Mentor and Creating a Culture where Mentoring Thrives (6/15)

American Medical Women's Association's Centennial Meeting keynote: Increasing Women's Influence and Leadership: What have we learned and what are we learning? (4/15)

Georgetown University School of Medicine Women in Medicine: Effective Negotiation: Meeting your Goals while Building Relationships (4/15)

Association of American Medical Colleges' Group on Institutional Advancement: Hard Work and Talent Aren't Enough: Developing Organizational Savvy and Managing Key Relationships (4/15)

University of California-Davis: How Men can Excel as Mentors of Women (2/15)

North Carolina Women in Cardiology annual meeting meeting keynote: Thinking Like the CEO of Your Own Career (2/15)

University of Michigan Translational Oncology Seminar: What Have We Learned about Gender, Power & Advancement? And What's Ahead ?(1/15)

McMaster University Department of Psychiatry & Behavioural Neurosciences Education Day: Maximizing Your Impact as a Mentor and Creating a Culture where Mentoring Thrives (12/14)

George Washington University Faculty Development Workshop: Planning Your Career in Academia (11/14)

American Pancreatic Association Women in Pancreas Keynote: Thinking Like the CEO of Your Own Career (11/14)

Association of Women Surgeons Annual Conference: Transitions and Resilience: Growing and Thriving Throughout Your Life and Career (10/14)

Joint Statistical Meetings Workshop: Strategic Career Development (8/14)

Biotronik International Fellows Program's Career Development Workshop (6/14)

Women in Statistics Conference Keynote: Power, Gender & Advancement (5/14)

Women Executives in Science & Healthcare's Executive Leadership Summit: Career Workshop for Senior Women Leaders in Medicine and Science (5/14)

George Washington University School of Health Sciences Faculty Development Series: Generational Differences Affecting Teaching and Learning (4/13)

Association of American Medical Colleges' Group on Institutional Advancement: "Sharpening Your Leadership Acumen and Expanding Your Influence" (3/14)

Texas Tech University Health Sciences Center's Third Annual Cultural Competence Conference: "Leading from the Middle" and "Negotiating Difficult Conversations" (3/14)

Association of American Medical Colleges' Mid-Career Women Faculty Professional Development Seminar: "Bridging Generational Differences--Key to Talent Development, Mentoring, and Leading" (12/13)

Jersey Shore Medical Center: Turning a "Team of Experts" into an "Expert Team": What Skills Does

Interdisciplinary Work Require?; What Happens When Difficult Issues Arise in Important Relationships? Making the “Undiscussable” – Discussable; Maximizing our Impact as Mentors and Role Models: Contemporary Needs and Approaches; Hard Work and Talent Aren’t Enough: Developing Political Savvy and Managing Key Relationships; You are the CEO of Your Own Career: Frequently Asked Questions and Smart Strategies (12/13)

American Association for the Study of Liver Disease’s Annual Meeting Session: “How is Your Vision of Success and Influence Changing? Developing Strategies that Work for You” (11/13)

George Washington University School of Health Sciences/Children's National Medical Center CTSI Conference: Becoming a Better Mentor of Women: What are we learning about when gender matters? (9/13)

University of Miami Miller School of Medicine: Women's Career Development Conference: Obtaining and Giving Mentoring across Career Stages; How is Your Vision of Success and Influence Changing?; Finding a Job that Fits (for Residents) (6/13)

University of Nebraska Medical Center: iLEAD Leadership Program: “Managing Up”: Achieving an Effective Partnership With Your Bosses; General faculty development: Resilience: Adapting to Complexity and Maintaining Your Effectiveness in Times of Turmoil (2/13)

Creighton University Women in Medicine and Science and Metro Omaha Medical Society: Hard Work and Talent Aren’t Enough: Developing Political Savvy and Managing Key Relationships (2/13)

St Joseph's Hospital & Medical Center: Adapting to Complexity and Change: Practices to Increase your Effectiveness as a Professional; Career Resilience: What do You Need to Do to Keep Growing? (2/13)

Jefferson Medical College: “That was time well-spent”: Leading Effective Meetings (and Improving your Participation when you are not in Charge); “Why do they act so entitled?”: Bridging Age Differences to Improve Medical Education (1/13)

Association of American Medical Colleges Mid-Career Women Faculty Professional Development Seminar: “Sex, Power & Advancement: What Have We Learned? What Are We Learning?” (12/12)

University of New Mexico School of Medicine: Department of Pathology seminar: “Mentoring and Coaching across Career Stages”; Office of Faculty Development: How Do You Define Resilience? Improving your Career Satisfaction and Self-Care; What Difficult Conversation Have You Been Postponing?: Preparing to Discuss the “Undiscussable”; ASERT Fellows seminar: Components of Career Resilience: Setting Goals, Speaking up about your Work and Forging Professional Connections (11/12)

University of Texas Health Sciences Center at San Antonio’s Office of Faculty Development: Division Chiefs and Program Leaders: “Mentoring and Coaching across Career Stages”; Junior Faculty: “Strategic Career Management: Optimizing Your Career Path” and “Improve Your Mentoring: Your Skills & Theirs”; Department Chairs “Helping Your Faculty Develop Organizational Savvy”; Department of Hospital Medicine: “Developing Organizational Savvy” and “Making the Best Use of your Time, Energy and Strengths” (10/12)

Association of American Medical Colleges Minority Faculty Development Program: “Maximizing your resilience as an individual, team member and leader” (9/12 and 9/13)

Michigan State University Departments of Medicine and Pediatrics: Maintaining your Effectiveness in Times of Turmoil; Career Resilience: Making the Best Use of your Time, Energy and Strengths (7/12)

Johns Hopkins Medical Center's Task Force on Women's Academic Careers in Medicine Annual Dinner Keynote: "Sex, Power & Advancement: What Have We Learned? What Are We Learning"; Faculty Workshop: "Maximizing your Return on Your Investment in your Career: Critical Skills for Thriving in Academic Medicine" (5/12)

Marshall University Joan C. Edwards School of Medicine: Women in Medicine and Science Leadership Forum Keynote: The Care and Feeding of your Career: Making Great Use of your Energies and Strengths; Workshop: What Happens When Difficult Issues Arise in Important Relationships: Making the "Undiscussable" – Discussable; Academy of Medical Educators: Leading Effective Meetings and Improving your Participation; Residents Seminar: Finding a Job that Fits: Assessing your Options, Interviewing and Negotiating (5/12)

Women Executives in Science & Healthcare's Executive Leadership Summit: "How is Your Vision of Success Changing and What do You Need to do to Keep Growing?" (5/12)

University of Nevada School of Medicine: Women in Health Sciences Interdisciplinary Session: "Courage, Creativity and Values: Maximizing Your Career Satisfaction and Your Leadership Potential" ; Office of Academic Affairs/Chairs Special Session: "How Can We Better Address Our Complex Adaptive Leadership Challenges?"; General Faculty Development Sessions: "Maximizing Your Impact as a Mentor and Role Model and Obtaining the Mentoring You Need"; "You Are the CEO of Your Own Career: Maximizing Your Career Resilience" (4/12)

University of Arizona Health Sciences Center: Leading Effective Meetings and Improving your Participation even when you are not in Charge; Hard Work and Talent Aren't Enough: Developing Political Savvy and Managing Key Relationships" (3/12)

Women in Nephrology Annual Lunch: Difficult Issues in Mentoring: Making the Undiscussable – Discussable (11/11)

NYU Langone Medical Center's Clinical Translational Science Institute: What Happens When Difficult Issues Arise in Mentoring Relationships? Making the Undiscussable – Discussable; TREC Grand Rounds: Difficult Conversations: Practice with Discussing the "Undiscussable" (10/11)

University of Alabama's Blaze Leadership Academy: Critical Dimensions of Leadership Resilience (10/11)

University of Alabama School of Medicine – Birmingham's Office of Faculty Development: Leading From the Middle: Relationship-Centered Management Skills (10/11)

University of Texas Medical Branch: Center for Addiction Research: From Boomers to Millennials: Bridging Generational Differences to Maximize Your Impact as a Mentor and to Make the Best Use of the Mentoring you Need (8/11)

M.D.Anderson Cancer Center Women Faculty Program Workshop: So I'm a Professor: Where Do I Go from Here? (6/11)

Cincinnati Children's Hospital Medical Center's Office for Faculty Development and CCTST workshops: Promoting Interdisciplinary Leadership and Collaboration Skills: How to turn a team of experts into an "expert team"; Effective Collaborations: Essential practices and skills for scientists, physicians and health care professionals (4/11)

Brody School of Medicine Women in Science and Medicine Conference: Strategic Individual Career Management and Facilitating Organizational Improvements (4/11)

Children's National Medical Center: Developing a Style that Works: Strategies for Finding and Using your

Voice (2/11)

Georgetown University School of Medicine Women in Medicine: “Everything Gets Done through People”: Creating Effective Collaborations (2/11)

Upstate Medical University: Faculty Toolbox Workshop: “Leadership Potential: Building your Courage and Key Administrative and Communications Skills” (1/11)

Association of American Medical Colleges’ Mid-Career Women Faculty Professional Development Seminar: “Maximizing your resilience as an individual, team member and leader” (12/10)

American Association for the Study of Liver Disease’s Annual Meeting Workshop: “Hard Work and Talent Aren’t Enough: Developing Political Savvy and Managing Key Relationships” (10/10)

Women in Ophthalmology Summer Symposium: “Critical Dimensions of Career Resilience and Empowerment” (8/10)

University of Texas Health Sciences Center at San Antonio’s Women Faculty Association “Hard Work and Talent Aren’t Enough: Developing Political Savvy and Managing Key Relationships”; General Medicine discussion group “Career and Leadership Development” (7/10)

The Commonwealth Medical Center’s 1st Annual Career Development Day: “Strategic Career Management” (6/10)

Cincinnati Children’s Hospital Medical Center’s Office of Faculty Development’s inaugural conference: “The Care and Feeding of your Career: Making great use of your time, energy and strengths”; “Growing your Leadership Potential” (5/10)

Metrohealth Hospital Faculty Workshop: “Bridging Generational Differences: Turning Challenges into Strengths”; Seminar for Residents/Fellows: “Strategic Career Management: Turning your Intellectual Capital into Career Capital” (5/10)

Massachusetts General Hospital’s Center for Faculty Development: “Everything Gets Done through People”: Improving Partnerships, Teamwork and Collaborations (4/10)

Jefferson Medical College Founders Day Program: “Bridging Generational Differences to Improve Medical Education and the Development of Faculty and Staff Talent” (2/10)

Boston University Medical Center Committee for Faculty Development and Diversity: “Everything Gets Done through People”: Creating Effective Collaborations and Teams (11/09)

Albert Einstein Medical Center Herbert S. Waxman Memorial Lecture: “Growing More Physician Leaders in Medicine: What do we need to do differently?” (10/09)

American Neurological Association Annual Meeting: “Tooting your own Horn without Blowing It: Effective Promotion of Yourself and Your Work” (10/09)

Cincinnati Children’s Hospital Medical Center Regional Faculty and Educator Development Symposium: Keynotes: “Mentoring and Coaching across Gender, Ethnicity and Generational Differences” and “Shifting the Culture from Competition to Collaboration”; Workshops: “Building Effective Teams” and “Relationship-Centered Feedback” (9/09)

Medical University of South Carolina: Leadership Development Institute Keynote “Developing Talent in the Academic Medical Center” (6/09)

Georgetown University School of Medicine Faculty Mentoring Program: “The Care and Feeding of your Career: Making the Best Use of your Time, Energy, and Strengths” (6/09)

Connecticut State Medical Society Women in Medicine Leadership Conference keynote: “Strategic Negotiation and Communication Skills” (5/09)

American College of Rheumatology Program Director's Conference: “Facilitating the Career Development of Today's and Tomorrow's Academic Rheumatologists” (3/09)

Emory University School of Medicine Department of Radiology Seminars: “How to Toot your Horn without Blowing It and Negotiate while Building Partnerships”; “Thinking Like the CEO of Your Own Career: Turning your Intellectual Capital into Career Capital” (3/09)

Academic Surgical Congress President's session: “Sex, Power & Advancement: What Have We Learned? What Are We Learning?” (2/09)

St. Josephs Hospital and Medical Center (Phoenix): Visiting Scholar: “Bridging Generational and Gender Differences to Improve Medical Education, Faculty Development and Leadership Development”; Administrative Leaders: “Talent Management: Facilitating the Career Development of Physicians”; Women's Interest Group: “Hard Work and Talent Aren't Enough: Developing Political Savvy” (1/09)

University of North Carolina School of Medicine: Pediatrics Grand Rounds “Talent Management: Facilitating the Career Development of Faculty and Residents”; Pediatrics Workshops: “Maximizing our Impact as Mentors: Contemporary Approaches” and “Thinking Like the CEO of Your Own Career” (11/08)

Oregon Health and Sciences University: Department Head Retreat “Bridging Generational Differences to Improve Faculty Recruitment and Development” (10/08)

American College of Gastroenterology Leadership Development Conference for Women (10/08)

University of New Mexico School of Medicine: “Forming Learning Partnerships to Create a More Inclusive Culture” ; Divisional Team Alignment Mini-Retreat; Women Faculty Leaders: “Career Resilience: How to Keep Growing (even when promotion isn't an option)”; Minority Women in Medicine: “Strategies for Finding and Using your Voice” (8/08)

Oregon Health and Sciences University: Session for Division Heads “Leading from the Middle: People Development Skills for Division Chiefs and Senior Faculty Leaders”; Medicine Grand Rounds “Generational Differences: Implications for Faculty Recruitment and Development in Academic Medicine and Science”; Professional Development Conference: “Career Resilience: Turning your Intellectual Capital into Career Capital” “Negotiating to Build Partnerships and Garner Resources” (6/08)

University of California, San Francisco Lifetime Achievement in Mentoring Award Keynote: “Thinking like the CEO of Your Own Career: Building Relationships and Political Savvy”; *Department of Pediatrics*: “Show Me a Successful Woman Who Isn't Considered “Difficult” and “Hard Work and Talent Aren't Enough” (5/08)

Association of Administrators in Academic Pediatrics Annual Conference: “Stepping Up to Complexity: Rising to the Personal and Organizational Challenges of Today and Tomorrow” (5/08)

Society for Vascular Surgery Women's Leadership Development Program “Strategic Career Building: Strategies for Success when Hard work and Talent aren't Enough” (4/08)

Association of Program Directors in Internal Medicine Annual Conference Precourse: “Negotiating to Discover Common Ground and Build Partnerships” (3/08)

Children's Hospital of Philadelphia: Faculty Retreat "Bridging Generational and Gender Differences: Turning Challenges into Strengths" (3/08)

Canadian Arthritis Network: "Turning your Intellectual Capital into Career Capital" (3/08)

Brown University School of Medicine: Women & Infants Hospital Faculty Session: "How Academic Medicine can thrive across the Generational Gap"; ADVANCE program "Shifting the Culture from Competition to Collaboration: Tools for Improving our Communications and Meetings"; OWM "Thinking Like the CEO of Your own Career: Advancing & Avoiding Career Derailers"; National Center of Excellence "Women and the Labyrinth of Leadership"; BIRCWH/WRHR: "Obtaining and managing the mentoring you need and building your network" (3/08)

American Medical School Pediatric Department Chairs' Annual Meeting: "Leading the Modern Department Facilitating Faculty Resilience and Bridging Generational Differences" (3/08)

University of North Texas Health Science Center Women's Council "Obtaining the Mentoring You Need & Maximizing your Impact as a Mentor" (2/08)

American College of Cardiology: Women's Career and Leadership Development Conference "Maximizing your Career Satisfaction and your Leadership Potential" and "Leading from the Middle – Deciphering Organizational Cultures and Developing Political Savvy" (2/08)

University of California-Davis: Faculty Work life Advisors: "Maximizing your Impact as Advisors and Mentors"; Reunion of Leadership Development Program Alums: "Moving into Administrative Roles: Opportunities, Pitfalls & Strategies"; Women's Research Center: "Hard Work and Talent Aren't Enough: How Savvy Women Maximize their Career Satisfaction and Success" (10/07)

West Virginia University Health Sciences Center's Council of Chairs: "Goal-Setting to Improve Faculty Career Development and Strengthen our Departments"; Faculty Development series: "Leading from the Middle and Managing Up"; "Capitalizing on Women's Intellectual Capital: What Do We Need to Do Differently?" (10/07)

University of Tennessee College of Medicine: Ob/Gyn Grand Rounds: "Relationship-Centered Management Skills: Increasing your Emotional Intelligence"; Faculty Workshops: "Everything Gets Done through People": The Art of Constructive Politics"; The "Care and Feeding" of your Career: Goal-setting and Time Management"; Postdocs workshop: "Turning your Intellectual Capital into Career Capital" (9/07)

United American Nurses Leadership Institute: "Using Your Personal Leadership Style To Work Effectively With All Kinds of People" (9/07)

M.D.Anderson Cancer Center: Panel for Departmental Chairs "Reflections on Resilience and Vitality: Strategies for Leaders and their People; Workshops:"Why don't women speak up? Strategies for finding and using your voice"; "Effective Delegation: How to build relationships and make better use of your time" (7/07)

University of Texas Health Sciences Center at San Antonio: Medicine Grand Rounds:" "Maximizing our Impact as Mentors: Contemporary Approaches"; Clinical Chairs Meeting: "Facilitating the Career Development of Faculty and Residents"; Faculty Development Advisory Committee and WFA "Thinking Like the CEO of Your Own Career:Goal-Setting, Advancing and Avoiding Career Derailers" (6/07)

University of Saskatchewan College of Medicine's Leadership Retreat: "Maximizing our Impact as Mentors and Building our Organizational Mentoring Capacity"; Medical Students:"Thinking Like the CEO of your own Career"; Health Sciences Faculty: "Strategic Career Management Skills: Turning Your Intellectual Capital Into Career Capital"; Workshop:"Obtaining and Managing the Mentoring You Need" (6/07)

University of Utah School of Medicine: "Hard Work and Talent Aren't Enough: Developing Political Savvy and Managing Key Relationships"; "Tooting your Horn without Blowing It: Why is Effective Self-Presentation

Harder for Women? How Can You Do It More Confidently?"; "Strategic Career Management" (5/07)

Chicago Medical School: "Strategic Career Management Skills: Turning your Intellectual Capital into Career Capital"; "Obtaining the Mentoring We Need, Being the Best Mentors We Can Be, and Building Organizational Capacity" (5/07)

UMDNJ-Robert Wood Johnson Medical School Department of Anesthesiology Grand Rounds "Effective Mentoring: Building Skills, Structures and Supports"; Junior Faculty Seminar Series "Career Management: Forward-looking Strategies for Common Dilemmas"; General Faculty Session "Turning your Intellectual Capital in to Career Capital" (4/07)

American Association for Cancer Research's Women in Cancer Research Leadership Forum Plenary: "Dancing with Opportunities: Making a Difference and Keeping your Aspirations Alive" (4/07)

Temple University School of Medicine Executive Team: "Faculty Development in the 21st Century" (3/07)

University of Calgary Professionalism Conference: "Bridging Generational Differences to Improve Professionalism" (3/07)

University of British Columbia Faculty of Medicine: "Growing Leaders at UBC: Bridging Generational and Gender Differences to Improve the Development of Faculty"; "Thinking Like the CEO of Your Own Career: Goal-Setting, Advancing and Avoiding Career Derailers" (3/07)

University of Washington School of Medicine Teaching Scholar Development: "Facilitating Effective Mentoring and Career Development" (2/07)

Group Health Center for Health Studies: "You are the CEO of Your Own Career: Strategic Career Management Skills" and "Courage, Creativity and Values: Maximizing your Career Satisfaction" (2/07)

University of Texas-Southwestern Department of Clinical Science: "You are the CEO of Your Own Career: Strategic Career Management Skills" and "Negotiation 101" (2/07)

American College of Cardiology: Women's Career and Leadership Development Conference keynote (2/07)

University of Tennessee College of Medicine: Ob/Gyn Grand Rounds: "Improving Faculty Vitality: Bridging Generational and Gender Differences and Supporting Career Development"; Workshop on Facilitating Organizational Change (1/07)

American Society of Transplant Surgeons Annual Winter Symposium: "Effective Mentoring: Obtaining the Mentoring We Need and Being the Best Mentors We Can Be" (1/07)

Ohio State University College of Medicine Combined Medicine-Surgery Grand Rounds: "Bridging Generational Differences to Improve Medical Education, Faculty Recruitment and Leadership Development"; Department Heads Council: "Characteristics of Effective Contemporary Mentoring"; "Tempered Radicals"--How to Rock the Boat for its own Good" (1/07)

ASCB's Women in Cell Biology Annual Meeting Workshop: "Turning your Intellectual Capital into Career and Leadership Capital" (12/06)

University of Massachusetts Medical School: Leadership Council: "Facilitating Women's Career Development at the University of Massachusetts"; Women Faculty Program: "Hard Work and Talent Aren't Enough: Developing Political Savvy and a Style that Works" (11/06)

Wayne State University School of Medicine Dept of Emergency Medicine Faculty Retreat: "Bridging

Generational Differences to Improve Medical Education, Faculty Recruitment and Leadership Development"; Faculty Forum: "Strategic Career Management Skills" (11/06)

Jefferson Medical College: "Hard Work and Talent Aren't Enough: Developing Political Savvy and Managing Key Relationships"; "Tooting your Horn without Blowing It: Why is Effective Self-Presentation Harder for Women? How Can You Do It More Confidently" (10/06)

Medical University of South Carolina: Residents Seminar: "Thinking Like the CEO of Your Own Career"; Medical Student Session: The "Care and Feeding" of your Career: Making Great Use of your Energies and Strengths; Faculty Development Workshops: "Career Development as a Long-Distance Hike: How Far Will You Climb and Well-Equipped Are You?"; "Hard Work and Talent Aren't Enough: How Savvy Women Maximize their Career Satisfaction and Success" (10/06)

University of California-Davis School of Medicine Psychiatry Grand Rounds "Facilitating the Career Development of Faculty and Residents" and Workshop: "Thinking Like the CEO of Your Own Career: Goal-Setting, Advancing and Avoiding Career Derailers"; Faculty Development Workshop "Being the Best Mentors We Can Be" (10/06)

University of Nebraska Medical Center: Administrative Colloquium: "Courage, Creativity & Values: Maximizing Your Career Satisfaction & Leadership Potential" and "Understanding Personality Preferences"; "Bridging Generational Differences to Improve Medical Education and Faculty Development" (9/06)

University of Minnesota Medical School: Department Heads Council: "Characteristics of Effective Contemporary Mentoring"; General Faculty Programs: "Obtaining and Managing the Mentoring You Need"; "Mentoring Across the Life of Your Career"; Special Program for Women Faculty: "Developing Political Savvy, Gracefully Tooting Your Horn and Avoiding Career Derailers" (9/06)

Oklahoma Univ College of Medicine Leadership Retreat: "Growing the Next Generation of Health Care Faculty and Leaders" (9/06)

SUNY-Stony Brook School of Medicine Anesthesiology Grand Rounds: "The Eye of the Beholder: Overcoming Mental Models of Gender, Ethnicity & Work Ethic"; Resident Lecture: "You are the CEO of your own career" (8/06)

University of New Mexico School of Medicine: Women Faculty Leaders: "Developing a Style that Works and Managing Key Relationships: Rising to Meet the Extra Challenges Women Face; Faculty Orientation: "Strategic Career Management Skills for Junior Faculty"; Minority Women in Medicine: "Staying Connected to What Matters Most" (8/06)

M.D.Anderson Cancer Center: Session for Departmental Chairs "Mentoring across Gender and Generational Differences: Turning Challenges into Strengths"; Women Faculty Networking Breakfast "Hard Work and Talent Aren't Enough: Developing Political Savvy and a Style that Works"; session for junior faculty: "Care and Feeding of Your Career" (6/06)

Vascular Annual Meeting: "Strategic Career Management" (6/06)

Temple University School of Medicine's 14th Annual Professional Development Program: "Power, Sex & Advancement" (5/06)

Brown University School of Medicine/Women & Infants Hospital National Center of Excellence in Women's Health: "Sex, Power & Advancement: What Have We Learned? What Are We Learning?"; Office of Women in Medicine: "Promoting Resilience and Renewal – Strategies for Staying Connected to What Matters Most" and "Tooting your Horn without Blowing It: Effective Presentation of Yourself and your Work" (5/06)

Society of General Internal Medicine Women's Caucus: "Negotiation 101" (4/06)

SUNY-Stony Brook School of Medicine: Faculty Development Workshop: "Strategic Career Management: Turning your Intellectual Capital into Career Capital"; WIM Program: "Maximizing your Career Growth and Satisfaction: The Extra Steps Women Still Need to Take" (4/06)

University of Connecticut Health Center: Special Session for Departmental Chairs, Division Chiefs, and Center Directors: "Improving Faculty Vitality: Bridging Generational Differences and Supporting Career Development"; Center for Interdisciplinary Research in Women's Health "Being the Best Mentors We Can Be" (4/06)

Medical College of Georgia Faculty Seminar: "Turning your Intellectual Capital into Career Capital: Skills and Strategies" (3/06)

American College of Cardiology Annual Scientific Session: "Career Development for Women Cardiologists: Thinking Like the CEO of Your Own Career" (3/06)

AAAAI 2006 Annual Meeting: "Leading from the Middle: Managing Key Relationships and Developing Political Savvy" (3/06)

Michigan State University Department of Medicine: Resident Noon Conference: "Are You the CEO of Your Own Career?: Setting and Achieving Career Goals" (2/06)

University of Cincinnati Faculty Development Lecture: "Constructive Politics: Organizational Savvy and Managing Key Relationships" (2/06)

Medical University of South Carolina Women Scholars Initiative: "Strategic Career Management: Aligning your Energies, Obtaining Mentoring, and Developing a Style that Works"; "Maximizing Your Career Growth and Satisfaction: The Extra Steps Women Still Need to Take"; "Constructive Politics: Managing Key Relationships and Negotiating for What You Need" (1/06)

University of Alabama at Birmingham: Medicine Grand Rounds: "Generational Differences: Implications for Resident and Faculty Recruitment and Development"; Faculty Seminars: "Thinking Like the CEO of Your Own Career"; "Self Care for Women Who Spread Themselves Too Thin" (1/06)

Society for Executive Leadership in Academic Medicine Conference Plenary: "Generational Differences: Implications for the Future of Faculty and Leadership Development in Academic Health Centers" (11/05)

Case Western Reserve University School of Medicine: Special Presentation: "Generation X: Implications for Faculty Recruitment and Development in Academic Health Centers" (11/05)

Oregon Health and Sciences University: OB/Gyn Grand Rounds: "Growing more women and men leaders in medicine: What do we need to do differently?"; Faculty Development Seminar: "Strategic career self-management" and "Negotiation 101"; Residents' Seminar: "Thinking like the CEO of your own career" (10/05)

East Tennessee State University James Quillen College of Medicine: [Chairs' Group](#): "Where the Rubber Hits the Sky: People Management and Mentoring Tools for Departmental Leaders"; Celebration of NLM Exhibit on [Changing the Face of Medicine: "Growing More Women Leaders"](#) ; ["Self-Care for Women Who Do Too Much"; "Tempered Radicals"--How to Rock the Boat for its own Good](#)" (10/05)

Rush Medical Center: Faculty Development Workshop: "Everything Gets Done through People" (9/05)

Women in Rheumatology: "Negotiation 101" (9/05)

Drexel University Provost Academic Excellence Faculty Development Program: "Sex, Power, & Advancement: Developing a Style that Works" (6/05)

Brown University School of Medicine Department of Emergency Medicine Grand Rounds: "Improving the Mentoring and Career Advising of Junior Faculty and Residents" (4/05)

American Association for Cancer Research's Women in Cancer Research Leadership Forum Plenary: "Thinking Like the CEO of Your Own Career" (4/05)

Dartmouth Women In Medicine and Science Conference Keynote: "Sex, Power, & Advancement: Learning from our Past and Moving On"; Workshops: "Choosing to Lead: Growing your own Career and Building Bridges to the Next Generation" and "Constructive Politics: Deciphering the Terrain, Managing Key Relationships and Avoiding Career Derailers"

American Dental Education Association Leadership Institute: "How to Turn your Intellectual Capital into Career Capital: Skills and Strategies for Continuing Growth (3/05)

Indiana University School of Medicine: Leadership in Academic Medicine Program seminar: "Commitments and Compassion" and "Building the Bridge (as you walk on it) to the Next Generation"; Women in Medicine and Science Leadership Seminar: Keynote: "Successful Career Building in Medicine" and Workshop: "Integrating Personal and Professional Priorities: Staying Connected to What Matters Most to You" (2/05)

Society of Academic Anesthesiology Chairs: "The Next Generation of Faculty and Leaders in Anesthesiology: Do You Know Where your "Children" Are?" (11/04)

Deans' Assistants Group 10th Anniversary Keynote: "Building and Celebrating Informal Power" (11/04)

University of Iowa Roy J. and Lucille A. Carver College of Medicine: "Improving the Career Advising of Junior Faculty: Dilemmas and Approaches"; "Thinking Like the CEO of Your Career" (10/04)

Vanderbilt School of Medicine: "Capitalizing on Women's Intellectual Capital" (10/04)

Association for Academic Psychiatry: "Mentoring across Differences to Grow the Next Generation of Leaders in Academic Psychiatry"; "Career Self-Management" (10/04)

Jefferson Medical College Faculty Development Workshop: "Turning your Intellectual Capital into Career Capital" (9/04)

American Academy of Otolaryngology Women in Otolaryngology Lunch Keynote: "Successful Career Building in Medicine: Negotiating for What You Need"; Panel Moderator: "Gender Stereotypes and Leadership: Rules are Meant to be Broken" (9/04)

University of Texas Medical Branch: "Managing the Mentoring You Need & Building Your Professional Network" and "Being the Best Mentors We Can Be: The Many Faces of Collegial Support and Career Advising" (9/04)

University of Pittsburgh Medical Center: Clinical Research Training Program's Mentor-Protégé Orientation and Training Workshop; Faculty Development Workshop: "Addressing Conflicts with your Boss and Co-workers" (9/04)

Joint Statistical Meetings Career Development Seminar: "Thinking Like the CEO of Your Career - Goal Setting, Advancing, and All the Necessary Skills In-Between" (8/04)

University of Mississippi Medical Center: Faculty Development Grand Rounds: “You are the CEO of Your Own Career” (5/04)

Jefferson Medical College: “Management Tool for Division Chiefs”; “Career Self-Management”; “Growing the Next Generation of Leaders”; Roundtable for Women Full Professors (5/04)

University of Pittsburgh Medical Center: Department of Medicine Grand Rounds: “Capitalizing on Women's Intellectual Capital”; Center for Research on Health Care: “You are the CEO of Your Own Career”; Women and Family Task Force Workshop: “Breaking Through Your Personal Glass Ceiling”; Birwch Scholars Workshop: “Self Care for Women Who Spread Themselves Too Thin” (4/04)

University of Texas-Houston Health Sciences Center: Surgery Grand Rounds: “Institutional and Individual Approaches to Improving Mentoring”; Association of Women Faculty Workshop: “Thinking like the CEO of your Career” (4/04)

College of Physicians of Philadelphia Kate Hurd-Mead Lecture: “Confessions of a Tempered Radical: Leading Change in a Half-Changed World for Women in Medicine” (3/04)

Duke University Medical Center: Medical Center Leadership Forum: “Identifying the Next Generation of Leaders in Academic Medicine”; Department of Medicine Grand Rounds: “Gender, Ethnicity and Generational Differences in Mentoring Relationships: Turning a Challenge Into a Strength”; Junior Faculty Workshop: “Thinking Like the CEO of Your Career”; Clinical Leadership Program: “The Many Faces of Mentoring” (3/04)

University of Arkansas Medical School: Pediatrics Grand Rounds: “The Eye of the Beholder: Overcoming “Mental Models” of Gender, Ethnicity and Generational Differences”; Annual WIM Dinner: “The Unfolding Drama of Women in Medicine: Learning from our Past and Focusing our Energies”; “Women Working with and for Women: Why is this harder than we expect it should be?” (2/04)

University of Virginia Medical Center Leadership in Academic Medicine Series: “Being the Best Mentors We Can Be”; Medical Student Series: “Believing in yourself as a Leader”; SOMCOW workshop: “Tempered Radicals--How to Rock the Boat for its own Good” (2/04)

Biophysical Society Annual Meeting: Committee for the Professional Opportunities for Women’s Workshop: “Successful Mentoring in Science” (2/04)

University of Ottawa: Dept of Family Medicine “Growing More Women & Men Leaders in Family Medicine”; Faculty Workshop “Sex, Power, & Advancement”; Gender Equity Committee and Extended Deans Group “When Heterogeneity meets Homogeneity: milImproving the Mentoring of Trainees” (2/04)

University of Kansas School of Medicine: Medicine Grand Rounds “Improving the Mentoring & Career Advising of Junior Faculty & Trainees” (1/04)

Midwest Women In Medicine and Science Conference keynote: “Sex, Power, & Advancement: Learning from our Past and Moving On”; Workshop: “Organizing and Supporting a Women In Medicine and Science Program” (1/04)

Radiologic Society of North America Refresher Course: “Encouraging the Advancement of Women” (12/03)

UMDNJ-Robert Wood Johnson Medical School Medical Grand Rounds “Improving the Mentoring and Advising of Junior Faculty and Trainees”; Workshop for Medical Faculty: “Thinking like the CEO of your own Career”; Workshop for Basic Scientists: “Obtaining and Managing Mentoring and Becoming a Better Mentor” (11/03)

University of Kentucky College of Medicine Medical Education Grand Rounds “Improving the Mentoring & Advising of Junior Faculty & Trainees”; “Taking Charge of Your Career and Capitalizing on Your Intellectual Capital”; “Dilemmas in Mentoring, Developing and Advising Junior Faculty” (11/03)

University of Louisville Health Sciences Center: “Management Tools for Division Chiefs”; “Taking Charge of Your Career and Getting Your Ideas Across: Challenges for Women in a Half-Changed World”; “When Heterogeneity Meets Homogeneity: Improving the Mentoring & Advising of Junior Faculty & Trainees” (10/03)

University of Colorado Health Sciences Center: Women’s Welcome Luncheon “Tips on Building your Power and Advancing your Career”; Faculty Skills Workshop, “Taking Charge of your Career: Setting and Communicating your Goals, Expanding your Network, and Avoiding Career Derailers; Executive Committee Meeting, “Improving the Career Development of Junior Faculty: Dilemmas and Approaches; Housestaff Breakfast: “Landing your First Job: Effective Self-Presentation and Self-Promotion” (10/03)

Mayo Medical School: Dept of Medicine Grand Rounds: “When Heterogeneity Meets Homogeneity: Meeting the Mentoring Needs of the Younger Generation”; Presentation for students/residents: “Taking Responsibility for Your Career: Goal-Setting, Network-Building & Effective Self-Presentation”; Annual Women’s Council dinner: “What Women Need to Know about Sex, Power & Advancement: You Are the CEO of Your Own Career” (10/03)

Congress of Neurological Surgeons Annual Meeting: “Show Me a Successful Woman Who Isn’t Considered “Difficult”: Developing a Style that Works to Advance your Career” (10/03)

Georgetown University Society for Medical Women: Overcoming Institutional and Individual Barriers to Advancement: Strategies to Enhance the Professional Development of Women (10/03)

Mayo Clinical Alumni Association 63rd International Meeting Keynote: Growing More Women & Men Leaders in Medicine: What Do We Need to Do? (10/03)

University of Tennessee College of Medicine: Setting and Achieving Career Goals (for faculty orientation); Institutional & Individual Approaches to Leadership Development (for Chair’s Leadership Forum)

St. Jude Children’s Hospital: Obtaining Strategic Career Advice: Building a Mosaic of Mentors (fellows and junior faculty) and Creating Faculty for the Future (open faculty forum) (9/03)

Women In Medicine Southern Regional Leadership Conference keynote: Sex, Power, & Advancement: Learning from our Past and Moving On (9/03)

National Cancer Institute Preventive Cancer Fellow Scientific Symposium: “Thinking Like the CEO of Your Own Career: Strategic Career Management Skills” (9/03)

National Institutes of Health Women in Science: “Obtaining and Managing the Mentoring You Need” (3/03 and 9/03)

M.D.Anderson Cancer Center: “Thinking like the CEO of Your Own Career” and “Constructive Politics: Deciphering and Managing Key Relationships” (8/03)

University of Texas Medical Branch: Faculty Women’s Caucus Luncheon: “Show me a Successful Women Who Isn’t Considered Difficult: Developing a Style that Works”; All Faculty Workshop “Constructive Politics: Deciphering the Terrain and Managing Up”; President’s Council and Diversity Council: “When Heterogeneity Meets Homogeneity: Making the Case for Diversity”; Women Faculty Workshop: “Taking Charge of Your Career: Goal-Setting, Managing your Time &

Presenting Yourself" (8/03)

University of New Mexico School of Medicine: Internal Medicine Grand Rounds "Eye of the Beholder; Overcoming Mental Models of Gender and Ethnicity"; Residents' Conference: "Landing a Job: Setting career goals and strategic network-building"; Faculty Development Seminar for new associate professors: "Setting Goals and Managing your Time"; Women Faculty Development seminar: "Thinking like the CEO of Your Own Career" and "Deciphering the Political Terrain and Managing Your Boss"; Women Faculty in Internal Medicine: "Strategic career management advice for women who do too much"; Minority Women in Medicine: "Meeting the Challenges of "Double Jeopardy" (8/03)

University of Florida Advanced Postgraduate Program in Clinical Investigation Retreat: "Improving the Mentoring and Career Advising of Senior Fellows and Junior Faculty" (6/03)

Memorial University of Newfoundland: "Taking Charge of Your Career: Goal-Setting and Advancing"; "Working Through Personality Differences at Work"; "Getting Your Ideas Across: Challenges for Women in a Half-Changed World" (6/03)

University of California-San Diego School of Medicine: National Center of Leadership in Academic Medicine workshop: "Taking Charge of Your Career: Goal-Setting, Managing your Time & Presenting Yourself"; Academy of Clinician Scholars: "Improving the Career Development of Junior Faculty: Dilemmas and Approaches"; VA Hospital: "Growing More Women & Men Leaders in Medicine: What Do We Need to Do?" (5/03)

Dartmouth-Hitchcock Medical Center Women Faculty Group Spring Speaker: "Capitalizing on Women's Intellectual Capital" and Medicine Grand Rounds: "When Heterogeneity Meets Homogeneity: Improving the Mentoring & Advising of Junior Faculty & Trainees" (4/03)

Northeastern Ohio Universities College of Medicine: "Increasing Women's Leadership in Academic Medicine" & "Thinking Like the CEO of Your Own Career" (4/03)

Tulane Xavier National Center of Excellence in Women's Health Seminar: "Be the CEO of Your Academic Career" (3/03)

Maimonides Medical Center Symposium: "The Leadership Edge for Women: Good for You, Good for your Institution" (3/03)

Women in Perinatology Special Focus Group: "You Are the CEO of Your Own Career" (2/03)

University of California-San Francisco School of Medicine Seminar: "The Professional Development of Women Faculty: When is a Ceiling Not a Ceiling?"; Housestaff Seminar: "Landing your First Job: Effective Self-Presentation and Self-Promotion"

Emory University School of Medicine Distinguished Guest Lecturer (1/03)

Massachusetts General Hospital's Office of Women's Careers: "Enhancing the Professional Environment at MGH for Women Faculty" (10/02)

Harvard Medical School Office of Women's Careers & Children's Hospital Office of Faculty Development Seminar: "Advancing Women at Academic Health Centers" (10/02)

Boston University Medical Center Women in Medical Sciences: "Thinking Like the CEO of Your Own Career: Goal-Setting and Advancing" (10/02)

American Academy of Pediatrics National Conference: “Meet the Expert: Obtaining Mentoring & Expanding your Professional Network” (10/02)

Wake Forest University Health Sciences’ History of Women in Medicine Symposium: “Looking Forward, Looking Back”; Women’s Health Center of Excellence Leadership Mentoring Program: “Managing the Mentoring You Need to Maximize Your Potential” (10/02)

Centers of Excellence Region V Schools & University of Illinois-Chicago’s Conference “Beyond Parity: Transforming Academic Medicine through Women’s Leadership”: Conference Keynote & Facilitator (9/02)

National Academy of Asthma, Allergy and Immunology Leadership Retreat Keynote and Facilitator: “Maximizing Women’s Professional Development & Advancement” (9/02)

National Research Council’s Committee on Women in Science and Engineering Conference “Achieving Excellence in Science: The Role of Professional Societies in Advancing Women’s Careers in Science and Clinical Research” Keynote (7/02)

Women in Urology Leadership Retreat: “Maximizing Your Professional Development” (6/02)

University of North Carolina at Chapel Hill School of Medicine Distinguished Guest Lecturer: Surgery Grand Rounds: “Increasing Women’s Leadership in Academic Medicine”; Ob/Gyn Grand Rounds: “Meeting the Professional Development Needs of Junior Faculty”; Seminar for Professional Women in Medical Education “Maximizing Your Professional Development Options” (5/02)

University of California-Los Angeles Dean’s Office for Educational Development and Research & UCLA National Center of Excellence in Women’s Health: “Mentoring and Networking: Maximizing Women’s Professional Advancement” (4/02)

Harbor-UCLA Pediatric Grand Rounds “Gender Differences in Medicine: Analyzing Stereotypes and Looking Ahead” (4/02)

University of Southern California’s Health Sciences Women Faculty Organization Annual Meeting Keynote: “How Women Can Maximize Their Professional Development Options” (4/02)

American Association of Neurological Surgery WIM Leadership Conference: “Building a Successful Academic Career” (4/02)

Brody School of Medicine, East Carolina University: Faculty Development Grand Rounds: “Will Gender Diversity Change the Profession?”; Department Chair’s Breakfast: “Meeting the Professional Development & Mentoring Needs of Women and Junior Faculty”; Seminar for junior faculty “Maximizing Your Professional Development Options”; and WIM Committee “Institutional Changes Needed To Capitalize on Women’s Intellectual Capital” (3/02)

Open Society Institute/United Hospital Fund’s Forum on Medicine as Profession: “Will Gender Diversity Change the Profession?” (2/02)

University of Chicago School of Medicine Department of Medicine Grand Rounds: “Gender Differences in Medicine: Analyzing Stereotypes and Looking Ahead”(1/02)

Rush-Presbyterian-St. Luke’s Medical Center: “Maximizing your Professional Development Options: Is your Future behind Schedule?” (1/02)

Maimonides Medical Center Women in Medicine Symposium “Institutional Changes Needed To Grow More Women Leaders”(12/01)

University of California-Davis School of Medicine New Faculty Orientation & Junior Faculty Development Conference: “Building a Career in Academic Medicine: The National Perspective” (10/01)

University of Cincinnati College of Medicine Pediatric Grand Rounds “Faculty Development in Academic Medicine: Is your Future behind Schedule?” (10/01)

Virginia Commonwealth University-MCV Surgery Grand Rounds: “Eye of the Beholder: Addressing Gender Differences & Stereotypes in Medicine” (9/01)

University of Massachusetts Medical School First Annual Women Faculty Awards Luncheon Keynote: “Growing More Women Leaders: What Can the U. of Massachusetts Do?”(5/01)

University of Missouri-Kansas City School of Medicine Faculty/Student Retreat on Mentoring (4/01)

Dalhousie University Faculty of Medicine "Distinguished Leaders in Medicine" Visiting Professor (2/01)

Association of Medical Microbiology & Immunology Chairs Annual Meeting: “Building an Institutional Faculty Development Focus” (1/01)

Brown University School of Medicine Office of Women in Medicine: “Is Your Career Behind Schedule?” and “Eliminating Gender Stereotypes from Medical Education” (11/00)

University of Pennsylvania School of Medicine Leadership Mentoring Program Conference Keynote: “Women & Academic Medicine: Toward Equity”; Workshop “Making Mentoring & Networking Work for You” (10/00)

University of Virginia Medical Center Medical Center Hour: “Women in Academic Medicine: The National Picture” (9/00)

American College of Obstetrics & Gynecology Districts VIII & IX Annual Meeting Forum: “Growing More Women & Men Leaders in Medicine: What Do We Need to Do?” (8/00)

American Thoracic Society International Conference Women's Luncheon Keynote: “Maximizing Your Potential and Managing the Mentoring You Need” (5/00)

Stanford University School of Medicine Symposium on the Pioneering Efforts of Women in the Medical Sciences Keynote: “Women & Academic Medicine: Is the Glass Half Empty or Half Full?” (3/00)

Northeastern Ohio Universities College of Medicine Medicine Grand Rounds (Summa Health System): “The Eye of the Beholder: Eliminating Gender Stereotypes”; Women and Medicine Organization: “Leadership Development in Perilous Times”; Human Values in Medicine: “Advancing in Medicine: Gender Differences” (3/00)

Medical College of Wisconsin College-wide Grand Rounds “Advancing in Medicine: Why Women and Men Still Aren’t Created Equal”; Women Faculty Council: “Managing the Mentoring You Need”; Faculty Benefits and Career Development Committee: “It Takes a Village to Improve Mentoring” (2/00)

Mt. Sinai School of Medicine Medical Education Grand Rounds “Meeting the Mentoring Needs of our Students & Faculty”; Women Faculty Organization Workshop “Managing the Mentoring You Need” (2/00)

University of Arizona Health Sciences Center Women in Medicine Organization: “Managing the Mentoring You Need: Maximizing your Potential”; Department Chairs and Dean’s Committee on Women Faculty: “Meeting the Mentoring & Professional Development Needs of Junior Faculty” (1/00)

PANELS and WORKSHOPS (selected since 2000)

AAMC Group on Faculty Affairs Professional Development Conference Workshops: “Difficult Conversations with the Powerful: Discussing the ‘Undiscussable’ and Contributing to Organizational Learning” [with ME Gusic and M Dankowski]; “How can we get better at talking about the differences that matter most?” [with Susan M. Pepin, Ann-Christine Nyquist, Leon McDougale, Valerie Romero-Leggott] (8/12)

AAMC Group on Faculty Affairs Professional Development Conference Workshops: “Leading From the Edge: What We Have Learned and Where We Need To Go” [with Janis Apted et al]; “Difficult Conversations in Mentoring Relationships: Making the “Undiscussable” Discussable” [with Susan Rosenthal] (8/11)

American Association for the Study of Liver Disease’s Annual Meeting Breakfast Panel Moderator: “Advice I Wish I’d Gotten Earlier: Lessons I Learned the Hard Way” (11/11)

AAMC Group on Faculty Affairs Professional Development Conference Workshops: “Leading From the Edge: What We Have Learned and Where We Need To Go” [with Janis Apted et al]; “Difficult Conversations in Mentoring Relationships: Making the “Undiscussable” Discussable” [with Susan Rosenthal] (8/11)

AAMC Group on Faculty Affairs Professional Development Conference Workshops: “Team Science: How can AHCs help faculty become more effective collaborators? [with Janis Apted and Susan J. Lieff]; “Imagine yourself in 2020: What do AMCs need to start doing differently to ensure the recruitment and promotion of the next generation of faculty?” [with Martin Feder] (8/10)

AAMC GEA/GSA Small Group Discussion GEA/GSA Small Group Discussion: An Era of Discontent – Understanding and Addressing Cynicism in Academic Medicine (11/07)

Association for Academic Psychiatry: Annual Meeting Panel: Turning your Intellectual Capital into Leadership and Career Capital (9/05)

National Institute on Drug Abuse Mentored K-Awardees Meeting: Making the Transition to Independent Scientist (speaker and panel moderator) (8/05)

Georgetown University Medical Center Faculty Mentoring Program Workshop (5/05)

Mellon Foundation Faculty Career Enhancement Workshop (“horizontal peer mentoring network”) (4/05)

American Association for Cancer Research’s Women in Cancer Research Leadership Forum: “Navigating the Halls of Power” (3/04)

Massachusetts School of Law Educational Forum (TV program) Panel: “Women in Medicine” (won two awards) (3/04)

American Association for Vascular Surgery/Society for Vascular Surgery Annual Meeting Panel: “Gender Issues in Vascular Surgery” (6/03)

George Washington University Center for Educational Leadership and Transformation: Meet the Leader Series (1/03)

ELAM Spring Session Panel with Deans: “Best Practices in Advancing Women at Academic Health Centers” (5/02)

Association of Teachers of Preventive Medicine Workshop: “Improving Faculty & Student Mentoring”

(3/02)

University of Virginia School of Medicine's combined Dean's Committees: "Meeting the Professional Development & Mentoring Needs of Junior Faculty" and "Capitalizing on Women's Intellectual Capital" (1/02)

American College of Chest Physicians National Conference Workshop: "Finding & Maximizing Career Advice & Expanding your Professional Network" (11/01)

American Academy of Orthopedic Surgeons Panel: "Faculty Turnover vs. Faculty Development: What Are the Costs?" (11/01)

Women in Medicine Pathways to 9th annual Leadership Conference (co-sponsored by the three Virginia medical schools): Workshop on "Maximizing your Professional Development Options" (3/01)

AAMC Faculty Affairs Professional Development Conference Plenary: "Developing Faculty for the Future" (1/01)

Gerontological Society of America National Conference Symposium Discussant: "Women Leaders in Academic and Clinical Medicine: Gender Climate, Work-Life Satisfaction, Humor, and Women's Health" (11/00)

AAMC Council of Deans Spring Meeting, "What Can We do to Support Women's Leaders in Medical Schools?" (4/00)

Transcript of the Testimony of
Janet Williams

Date:

April 28, 2021

Case:

LUCI LEYKUM vs UNIVERSITY OF TEXAS HEALTH SCIENCE

Janet Williams

April 28, 2021

IN THE UNITED STATES DISTRICT COURT
FOR THE WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION

LUCI LEYKUM, M.D.,)
)
Plaintiff(s))
) CIVIL ACTION
VS.) NO. 5:20-cv-00478-OLG
)
THE UNIVERSITY OF TEXAS)
HEALTH SCIENCE CENTER AT)
SAN ANTONIO,)
)
Defendant(s))

ORAL/VIDEO CONFERENCE DEPOSITION OF

JANET WILLIAMS, M.D.

APRIL 28, 2021
(Reported remotely)

ORAL/VIDEO CONFERENCE DEPOSITION of JANET

WILLIAMS, M.D., produced as a Witness at the instance of the Plaintiff, and duly sworn, was taken in the above-styled and numbered cause the 28th day of April, 2021, from 9:34 a.m. to 11:47 a.m., before Leesa L. Parker, CSR in and for the State of Texas, reported remotely by machine shorthand, pursuant to the Federal Rules of Civil Procedure, and the provisions stated on the record or attached hereto.

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<p style="text-align: right;">Page 2</p> <p style="text-align: center;">A P P E A R A N C E S</p> <p>(Appearing remotely via Videoconference)</p> <p>FOR THE PLAINTIFF(S):</p> <p>Mr. Kyle C. Watson</p> <p>Ms. Kennedy Hatfield Asel</p> <p>GOODE, CASSEB, JONES, RIKLIN, CHOATE & WATSON, PC</p> <p>2122 North Main Avenue</p> <p>San Antonio, Texas 78212</p> <p>FOR THE DEFENDANT(S):</p> <p>Ms. Amy S. Hilton</p> <p>Ms. Emily Ardolino</p> <p>OFFICE OF THE ATTORNEY GENERAL OF TEXAS</p> <p>Capitol Station</p> <p>P.O. Box 12548</p> <p>Austin, Texas 78711</p> <p>FOR THE DEPONENT:</p> <p>Ms. Rosalind Hunt</p> <p>OFFICE OF THE ATTORNEY GENERAL OF TEXAS</p> <p>Capitol Station</p> <p>P.O. Box 12548</p> <p>Austin, Texas 78711</p> <p>The Zoom Attendant/Videographer: MR. TREY GRUN</p> <p>Also Present: MR. MATTHEW GROVE, MS. LUCI LEYKUM, MS. ANA VIEIRA AYALA, MR. JACK PARK</p> <p style="text-align: center;">* * * * *</p>	<p style="text-align: right;">Page 4</p> <p>(Deposition Proceedings commencing at</p> <p>9:34 a.m. Reading of the Federal setup is waived.</p> <p>Exhibits, if any, will be produced with the transcript, unless otherwise noted on the record. Any other agreements, if any, will be stated on the record.)</p> <p>THE COURT REPORTER: We are on the record.</p> <p>Today's date is April 28, 2021, and the time is</p> <p>9:34 a.m. This is the deposition of Janet Williams, M.D., and it is being conducted remotely, by agreement of the parties. My name is Leesa Parker, Texas CSR No. 5343. I am administering the oath and reporting the deposition remotely, by stenographic means, from my residence in Helotes, Texas.</p> <p>Would Counsel please state their appearances for the record, and I will swear in the Witness.</p> <p>MR. WATSON: Kyle Watson and Kennedy Hatfield Asel, on behalf of Dr. Luci Leykum.</p> <p>MS. HILTON: Amy Hilton and Emily Ardolino, for the University of Texas Health Science Center at San Antonio.</p> <p>MS. HUNT: Rosalind Hunt for Dr. Janet Williams.</p> <p>JANET WILLIAMS, M.D., having been first duly sworn, testified as follows:</p>
<p style="text-align: right;">Page 3</p> <p style="text-align: center;">I N D E X</p> <p style="text-align: right;">PAGE</p> <p>Appearances 2</p> <p>Stipulations (Attached hereto) N/A</p> <p>WITNESS: JANET WILLIAMS, M.D.</p> <p>Examination by Mr. Watson..... 4</p> <p>Changes and Signature 59</p> <p>Reporter's Certificate 60</p> <p style="text-align: center;">E X H I B I T S</p> <p style="text-align: right;">PAGE</p> <p>NO. DESCRIPTION FIRST REFERENCED</p> <p>1 8</p> <p>Biographical Sketch of Janet Williams, M.D.</p> <p>2 25</p> <p>Affidavit of Janet Williams, M.D.</p> <p>3 51</p> <p>FY 2018 Gender Pay Equity Report</p> <p style="text-align: center;">* * * * *</p>	<p style="text-align: right;">Page 5</p> <p style="text-align: center;">E X A M I N A T I O N</p> <p>BY MR. WATSON:</p> <p>Q. Good morning, Dr. Williams.</p> <p>A. Good morning.</p> <p>Q. Thank you for being with us today for your deposition. I don't anticipate your deposition taking a long time, at least insofar as my questions are concerned. But would you please state your full and complete name for the record?</p> <p>A. My name is Janet Florence Williams.</p> <p>Q. And, Doctor, you and I have met before, correct?</p> <p>A. Yes, sir.</p> <p>Q. Okay. And I guess the last opportunity that we had to visit is when I called you, and you had indicated that you had been appointed counsel and were not able to communicate with me any further, in essence; is that right?</p> <p>A. That's correct.</p> <p>Q. Okay. And we not -- And we have not communicated since, correct?</p> <p>A. No, we have not.</p> <p>Q. Okay. I -- I did --</p> <p>(Audio break.)</p> <p>Q. (BY MR. WATSON) I think you may have a dog</p>

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<p style="text-align: right;">Page 6</p> <p>1 down there on the River Walk, Janet.</p> <p>2 I -- I think I did mention the occasion</p> <p>3 may occur where we will need to take your deposition,</p> <p>4 inasmuch as you have information relative to some</p> <p>5 background facts, that we have included in our complaint</p> <p>6 on behalf of Luci Leykum. And so, that's what we're</p> <p>7 here for today is to take your deposition. All of my</p> <p>8 questions will be very straightforward and, quite</p> <p>9 frankly, I don't think you'll be surprised by any of my</p> <p>10 questions, because I've already asked the questions to</p> <p>11 you in the past when we met. And they were questions</p> <p>12 that I needed in order to have a better understanding of</p> <p>13 UT Health.</p> <p>14 Have you ever had your deposition taken</p> <p>15 before?</p> <p>16 A. No.</p> <p>17 Q. Okay. What we'll do is keep this in a question</p> <p>18 and answer format. And by that I mean you will often</p> <p>19 anticipate what the completion of my question will be,</p> <p>20 and we have a natural tendency to answer the question.</p> <p>21 If you'd just allow me to complete the full question, I</p> <p>22 will allow you to complete your full answer, and try not</p> <p>23 to -- (audio interruption) -- that way, Leesa, our court</p> <p>24 reporter, is able to get a clean record of everything</p> <p>25 that is said in our deposition, and it makes it easier</p>	<p style="text-align: right;">Page 8</p> <p>1 Rosalind, for whatever purpose, just simply say so,</p> <p>2 okay, and we'll go off the record. That's freely</p> <p>3 granted.</p> <p>4 And, lastly, if -- if I ask a question</p> <p>5 that's perhaps not entirely artful -- I'm just having my</p> <p>6 second cup of coffee, so bear with me -- then ask for</p> <p>7 clarification, and I will try to clarify any question</p> <p>8 that might be a bad question. Okay?</p> <p>9 A. Thank you. Yes.</p> <p>10 Q. Could you tell us how you are currently</p> <p>11 employed?</p> <p>12 A. I'm employed by the University of Texas Health</p> <p>13 Science Center at San Antonio, in the school of</p> <p>14 medicine.</p> <p>15 Q. Okay. And just before the deposition started,</p> <p>16 just moments ago, Ms. Hunt e-mailed us your biographical</p> <p>17 sketch. I'm going to go ahead and mark this as</p> <p>18 Exhibit 1 to your deposition, and just ask you, if you</p> <p>19 would, verify that this is a current CV for you, if you</p> <p>20 would, three -- three pages?</p> <p>21 A. -- (interruption) is a current Biographical</p> <p>22 Sketch summary of my CV, yes.</p> <p>23 Q. Very good. Okay.</p> <p>24 So, in your current capacity you are a</p> <p>25 tenured professor, a distinguished teaching professor,</p>
<p style="text-align: right;">Page 7</p> <p>1 for all of us to read later.</p> <p>2 MR. WATSON: Sounds like somebody's in a</p> <p>3 kitchen or something. I don't know -- Is there a way we</p> <p>4 could --</p> <p>5 THE COURT REPORTER: I think it's taken</p> <p>6 care of. I believe it was the phone -- the phone-in.</p> <p>7 It looks like it was muted now.</p> <p>8 MR. WATSON: Okay. Very well. Thank you,</p> <p>9 Jack.</p> <p>10 Q. (BY MR. WATSON) So, we just need to have a</p> <p>11 clean record in order that it makes it easier to read</p> <p>12 and we're not walking on each other's words. It makes</p> <p>13 it a whole lot easier for Leesa, our court reporter.</p> <p>14 Okay?</p> <p>15 That's the other thing that we need to do</p> <p>16 is, you're nodding your head, and I completely get what</p> <p>17 you're saying to me, but Leesa can't get down a nod of</p> <p>18 the head.</p> <p>19 A. I understand what you said.</p> <p>20 Q. Okay. Perfect. That's all we need. And so,</p> <p>21 as long as we get audible responses, Janet, and I give</p> <p>22 you audible questions, we're in good shape, we'll get</p> <p>23 through this easy.</p> <p>24 If at any point you want to take a break</p> <p>25 for whatever reason, to go to the restroom or talk to</p>	<p style="text-align: right;">Page 9</p> <p>1 and Vice Dean for faculty at UT Health Science Center;</p> <p>2 is that right?</p> <p>3 A. Yes, for the School of Medicine.</p> <p>4 Q. For the School of Medicine.</p> <p>5 A. -- (interruption) faculty, yeah.</p> <p>6 Q. Okay. How long have you worked for the School</p> <p>7 of Medicine?</p> <p>8 A. Since 1986.</p> <p>9 Q. And during the course of your working</p> <p>10 experience, could you just start us from your first</p> <p>11 position in 1986 to how you arrived upon your current</p> <p>12 tenure professorship as Vice Dean for Faculty, just kind</p> <p>13 of walk us through your career?</p> <p>14 A. Yes.</p> <p>15 MR. WATSON: You can take down the</p> <p>16 exhibit.</p> <p>17 A. I started as an assistant professor on tenure</p> <p>18 track. I received promotion to associate professor and</p> <p>19 tenure approximately nine years later. And</p> <p>20 approximately 10 years after that I received promotion</p> <p>21 to professor. And going the other way, in 2011 --</p> <p>22 mid 2011, I -- actually, prior to that I applied for --</p> <p>23 but, in mid 2011 I was competitively selected to be the</p> <p>24 Inaugural Associate Dean for Faculty and Diversity. And</p> <p>25 approximately three years ago my title was elevated to</p>

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<p style="text-align: right;">Page 10</p> <p>1 Vice Dean for Faculty.</p> <p>2 Q. (BY MR. WATSON) Okay. Were you done? I don't</p> <p>3 want to interrupt you.</p> <p>4 A. Sure.</p> <p>5 Q. Okay. Tell me a little more about the</p> <p>6 Inaugural Associate Dean for Faculty and Diversity.</p> <p>7 What were the responsibilities associated with that?</p> <p>8 A. The responsibilities were to found that office,</p> <p>9 and try to look at the major needs and policies in an</p> <p>10 application to faculty of the School of Medicine and</p> <p>11 their careers -- career development.</p> <p>12 Q. So, you've been just a little north of 35</p> <p>13 years, right?</p> <p>14 A. Something like that. I think it's a little</p> <p>15 shorter than 35, but thank you.</p> <p>16 Q. Yeah. Thereabouts. You've seen a lot of</p> <p>17 change, right?</p> <p>18 A. Yes, sir.</p> <p>19 Q. A lot of growth?</p> <p>20 A. Yes.</p> <p>21 Q. When you were the Inaugural Associate Dean, in</p> <p>22 terms of analyzing and developing policy in connection</p> <p>23 with major needs, what -- what needs, at the time, did</p> <p>24 you find and observe and try to cure?</p> <p>25 A. I think changing faculty processes from</p>	<p style="text-align: right;">Page 12</p> <p>1 So, there will be, at times, objections to questions or</p> <p>2 perhaps even your response. Those are matters, Janet,</p> <p>3 that we take up later with the federal judge. So, they</p> <p>4 won't affect you unless Ms. Hunt instructs you not to</p> <p>5 answer a question. Otherwise, you're free to respond.</p> <p>6 Okay?</p> <p>7 A. So, would you repeat the question, please?</p> <p>8 Q. (BY MR. WATSON) Yeah. When you were the</p> <p>9 Inaugural Dean in 2011, who -- who, at that time, was</p> <p>10 responsible for essentially what Dr. Chaquita Collins</p> <p>11 does today?</p> <p>12 MS. HILTON: Objection, form.</p> <p>13 MS. HUNT: You can answer.</p> <p>14 Q. (BY MR. WATSON) You can -- You can respond.</p> <p>15 A. No one, in that my role was forming, and then</p> <p>16 later so was hers. So, hers has evolved separately from</p> <p>17 what I was doing at the time or doing now.</p> <p>18 Q. So, I'm trying to, in my mind, create the</p> <p>19 timeline, because we had two programs that were</p> <p>20 evolving, yours and hers. When I says "yours" obviously</p> <p>21 I'm talking about Dr. Janet Williams. When I say "hers"</p> <p>22 I'm right now, currently, talking about Dr. Chaquita</p> <p>23 Collins. Okay?</p> <p>24 Do you recall, at that period of time,</p> <p>25 what role Dr. Collins had in the process of the evolving</p>
<p style="text-align: right;">Page 11</p> <p>1 completely paper to a trackable electronic process, and</p> <p>2 a major focus was faculty appointments.</p> <p>3 Q. Okay. I'm going to ask you more about faculty</p> <p>4 appointments later. But how long were you in that</p> <p>5 position?</p> <p>6 A. Well, basically, since 2011, mid year.</p> <p>7 Q. Okay. In your role -- Let me ask you this.</p> <p>8 Was there a -- At the time that you were the Dean for</p> <p>9 Faculty and Diversity, was there actually a -- a</p> <p>10 professor, like Dr. Collins is now, heading up</p> <p>11 diversity?</p> <p>12 A. No, sir.</p> <p>13 Q. Okay. Would that have been tantamount to your</p> <p>14 role then?</p> <p>15 A. No.</p> <p>16 Q. Okay. Who, then -- When you were the Inaugural</p> <p>17 Dean, who would have been responsible for the</p> <p>18 responsibilities that Chaquita Collins has today?</p> <p>19 MS. HILTON: Objection, form.</p> <p>20 A. Pardon me?</p> <p>21 Q. (BY MR. WATSON) One thing I should have told</p> <p>22 you earlier was we've got one, two, three, four, five</p> <p>23 lawyers on this, and in depositions if a lawyer believes</p> <p>24 that there's a question that was asked, or an answer or</p> <p>25 response was objectionable, they have a right to object.</p>	<p style="text-align: right;">Page 13</p> <p>1 diversity role?</p> <p>2 A. So, there was no other Dean for Inclusion and</p> <p>3 Diversity, until a couple years after I had my role the</p> <p>4 diversity portion segued to someone in the undergraduate</p> <p>5 Medical Education Department, because it was focused on</p> <p>6 the Undergraduate Medical Education accreditation. And</p> <p>7 that -- then that person took another job, and</p> <p>8 Dr. Collins was actively nationally recruited. And then</p> <p>9 she took over the focus on diversity, and originally</p> <p>10 related to accreditation standards.</p> <p>11 Q. What year was that?</p> <p>12 A. I don't know for certain. I'm going to say</p> <p>13 three years ago, so 20- -- was the fall of -- I don't</p> <p>14 know -- 2018, I guess.</p> <p>15 Q. Okay. Before the fall of 2018, in terms of</p> <p>16 diversity and inclusion, within the school of medicine,</p> <p>17 whose responsibility would that fall to?</p> <p>18 MS. HILTON: Objection, form.</p> <p>19 A. Not a specific person. It was a group</p> <p>20 responsibility.</p> <p>21 Q. (BY MR. WATSON) Okay. Well, let's -- let</p> <p>22 me -- let me just ask this question, hypothetically.</p> <p>23 Prior to the fall of 2018, when there was a group effort</p> <p>24 in addressing issues of inclusion and diversity -- Am</p> <p>25 I -- Am I stating that right, it was a group effort?</p>

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<p style="text-align: right;">Page 14</p> <p>1 A. I don't -- I don't know. Let me hear the rest 2 of the question. 3 Q. Okay. That's fair. 4 If -- If, hypothetically, there was going 5 to be a study done on parity among gender, with respect 6 to wages and compensation, who would spearhead that 7 effort? 8 MS. HILTON: Objection, form. 9 A. It would be through probably my office, if it 10 were related to faculty, in the School of Medicine. 11 Q. (BY MR. WATSON) Okay. Is that something -- 12 When you say through your office, is that something that 13 you would direct and control with the assistance of 14 others? 15 MS. HUNT: Objection, form. 16 MS. HILTON: Same objection. 17 MR. WATSON: We can agree that one 18 objection is good for all, y'all. 19 MS. HILTON: Okay. 20 A. So, any study done involves many people. 21 Q. (BY MR. WATSON) Okay. I understand that. But 22 I guess what I'm asking is, the study -- (audio break) 23 it originates at the time, before Dr. Collins arrived, 24 would have originated under your tutelage or within your 25 office; is that fair?</p>	<p style="text-align: right;">Page 16</p> <p>1 are not included. They're not salaried. Also, excluded 2 were such as moonlighting physicians. You have to 3 include rank and gender, and track -- nontenured track 4 versus tenured track. And excluded were things like 5 instructor title, because they are a -- it's a rank, but 6 they're "temporary" faculty. You're making a decision 7 about their permanency. And, like I said, moonlighting 8 faculty. Also, the leadership faculty were excluded -- 9 the Deans, the Chairs. They have a number of factors 10 that go -- that contribute to their salary. Ph.D. are 11 analyzed separately from MD, DO degrees, and -- and 12 they're analyzed in the context of their department. 13 And because the departmental comparison -- salary 14 comparisons differ. So, I think that's maybe the major 15 inclusion and exclusionary factors. 16 Then, as a whole, you have to decide what 17 components of the salary are included. There's a base 18 salary. It's called an X, Y, Z Plan. Their specialty 19 needs to be compared comparably, and any additional 20 payments. So, productivity payments or additional 21 payments. 22 So, in comparing those within departments 23 or divisions, they're compared as a whole, men versus 24 women, anonymously, other than -- with a number, other 25 than -- it wasn't individual enough. It's very</p>
<p style="text-align: right;">Page 15</p> <p>1 A. Yes. 2 Q. Okay. And did -- did you, in fact -- and I say 3 "you" -- under your tutelage, not you alone. Did you, 4 in fact, conduct those studies, specifically studies 5 with respect to parity among men and women and 6 compensation? 7 A. There was a study that we did conduct, in 8 general, about gender, salary, equity. 9 Q. And do you recall what year that study was? 10 A. Twenty- -- 2016, on 2015 data. 11 Q. So, fiscal year '15? 12 A. Correct. Data. It was -- of course, needed 13 the complete year to do the study. 14 Q. Tell me the methodology involved, since I don't 15 know what would -- what would be involved in such a 16 study, if you would, kind of explain to me the approach, 17 how we get to the end result, the data that is looked 18 at. If you could just kind of explain to us what's 19 involved in a study. 20 A. So, there are many factors. One needs to look 21 at who's going to be included and who's going to be 22 excluded, and -- and then what a benchmark might be, as 23 a basis for comparison. Inclusion criteria with faculty 24 included all paid faculty. We have a large number of 25 voluntary faculty, like any teaching school, and those</p>	<p style="text-align: right;">Page 17</p> <p>1 difficult to compare and, at that time, not possible to 2 compare every person. However, it was shown that every 3 person fell within a margin of the percent of the 4 benchmark. In other words, if you use the national 5 median -- so, a different national median was used for 6 PhDs versus MDs -- do -- does everybody in this unit 7 that's analyzed fall within an acceptable percentile 8 difference from that median, and that's what we showed. 9 Q. And that report is reduced to writing? 10 A. There is a summary, yes. 11 Q. A couple of questions about the methodology. 12 And I really appreciate that explanation; I think it was 13 good. One question I have is, who is included, and the 14 inclusion criteria. And you'd indicated all paid 15 faculty, right? 16 A. Well, yes, except for, like I said, the 17 instructor rank, the ones that are moonlight- -- they're 18 paid, but the -- what should we say -- solid non-tenure 19 and tenure track ranks, which are generally or always 20 assistant professor, associate professor, or professor. 21 Because the others are -- there aren't benchmarks for 22 those. We wanted to have -- There aren't national 23 benchmarks. 24 Q. I gotcha. I understand. 25 So, I understand moonlighting, the term,</p>

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<p style="text-align: right;">Page 18</p> <p>1 as it relates to law enforcement, for example, but I'm 2 not real clear on what moonlighting is as it relates to 3 academic medicine. 4 A. Okay. Moonlighting means you're hiring someone 5 extra to work, in a piecemeal wage, for a certain number 6 of hours to cover a certain service. The most common 7 one is the emergency room. So, some emergency room 8 doctors like to just work -- fill in -- excuse me -- 9 fill in shifts and -- and take so many moonlighting 10 shifts at different places, without having just one 11 standard employer. 12 Q. In the analysis, is there a consideration for 13 those members of the faculty that also have a VA 14 appointment? 15 A. I'm sorry, I didn't understand that. 16 Q. In the analysis -- 17 A. Yes. 18 Q. -- when you're -- when you're viewing the 19 faculty for comparison purposes, in the study, is 20 there -- 21 A. Yes. 22 Q. -- is there a consideration of any collateral 23 pay, for example, if you have a VA appointment? 24 A. Oh, VA. I'm sorry. The VA salary was included 25 in the total salary.</p>	<p style="text-align: right;">Page 20</p> <p>1 that study, it was included. 2 Q. Okay. In that study of fiscal year 2015 it was 3 included. As time has evolved, has your opinion 4 changed? 5 A. Only that it has to be clear to treat the 6 inclusion or exclusion of that salary when another study 7 is done. 8 Q. Had you or your office conducted any studies on 9 wage equity similar to your fiscal year 2015 study? 10 A. Yes. 11 Q. Have you done those studies every year since 12 2015? 13 A. No. 14 Q. Do you know how many other studies similar to 15 the analysis you just walked me through, as you did in 16 fiscal year 2015, did you do? 17 A. One. 18 Q. One in addition to fiscal year 2015? 19 A. Yes. 20 Q. And what year would that have been? 21 A. 2018. But that would be 2017 data. 22 Q. -- fiscal year. 23 Was there a 2016 done? 24 A. A study done? 25 Q. Yes.</p>
<p style="text-align: right;">Page 19</p> <p>1 Q. Do you have an opinion on if it should be? 2 A. Yes. 3 Q. What is your opinion? Did that -- that 4 question make any sense? 5 A. Yes. 6 Q. Okay. Just making sure we're on the same page. 7 I'm just asking, because you -- you're -- I suspect 8 you're educating a lot of people on this -- in this 9 deposition today, other than me. At least I would hope 10 so. But if there is a factor in consideration with the 11 VA appointment, I mean, do you think that is something 12 that should be included in the analysis of wage parity 13 within the School of Medicine? 14 A. So, I have a different opinion, in the ensuing 15 years, from when I did the study in 2016. So, if the -- 16 the salary parameters are clearly included and -- and 17 described, then that gives the other part of the faculty 18 salary. So, you have to either include them or not. 19 And if you don't include them, then you have to prorate 20 the University salary to make it whole. So -- So, I 21 think just as long as there are clear parameters, and 22 they're applied to everybody, yes, inclusion or not 23 inconclusion could serve the purpose, as long as, let's 24 say, the 50 percent that's not VA is prorated. So, that 25 definitely has to be described in the methodology. In</p>	<p style="text-align: right;">Page 21</p> <p>1 A. Is that what -- Repeat, please. 2 Q. Yeah, I'm sorry. So, you did -- You did one 3 in -- in fiscal year 2015, and you just walked me 4 through that analysis. 5 A. And that was reported -- a summary of that was 6 reported in 2016. 7 Q. Right. Okay. And then you did a 2018 from 8 data that was analyzed in 2017? 9 A. Right. 10 Q. Was there a study done in 2017 with data from 11 2016? 12 A. No. 13 Q. And why is that? 14 A. Well, the reason is, the first one was 15 voluntary. We -- We decided to do that study. It 16 happened to coincide with the then new Chancellor of the 17 U.T. System also -- McCraven -- also being interested in 18 that area. It's an extremely cumbersome study to do. 19 It's very difficult to make comparisons inside the 20 institution and across institutions. So, by 2018 -- or 21 2017, because that's when we were collecting the data -- 22 the effort in the system was can we do something to 23 compare across the system. Which -- So, the interim 24 year was spent trying to improve the ability to have 25 valid results. And everyone tried to do the study again</p>

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<p style="text-align: right;">Page 22</p> <p>1 in 2018 on 2017 data, and it's -- that was the last one 2 done. 3 Q. Okay. You mentioned earlier, with -- with 4 respect to the individuals excluded in the study, you 5 mentioned certain leadership faculty -- 6 A. Uh-huh. 7 Q. -- such as Chairs or Deans. Does that include 8 Division Chiefs? 9 A. Yes, it did, at that time. 10 Q. Okay. 11 A. Institute Directors also. 12 Q. And back to a question about the moonlighting. 13 Would -- Would moonlighting or additional clinical 14 services be included in the total compensation on the 15 comparison? 16 A. It's whatever came out of the Human Capital 17 Management Payroll System that said this is a person's 18 total base salaries, specialty area, department 19 division, special certification area, increase in pay. 20 And then the last one is productivity measures and extra 21 measures, but it does not include moonlighting, per se. 22 Q. Okay. 23 A. Most people -- If you're a full-time faculty 24 member here, that -- moonlighting is not generally 25 applicable to you, because you have a full-time job.</p>	<p style="text-align: right;">Page 24</p> <p>1 Q. Okay. And let me -- let me do this. Let me 2 pivot into a little more substance about how -- how we 3 got to where we are today, with this matter that 4 involves Dr. Leykum. You have read her complaint; is 5 that right? 6 A. No, not really. 7 Q. Okay. You have an understanding of what her 8 complaints were with respect to her salary reduction 9 before she left the School of Medicine? 10 MS. HILTON: Objection, form. 11 A. I have a general understanding of her 12 complaint. 13 Q. (BY MR. WATSON) And tell me, what is that 14 understanding? 15 A. That she felt her salary reduction was unfair. 16 Q. And did you formulate an opinion on whether or 17 not you agreed with her on that? 18 A. Yes. 19 Q. And what was that opinion? 20 A. I was surprised she received a salary 21 reduction. 22 Q. Why is that? 23 A. Her reputation was impeccable, in her 24 productivity, her leadership, and her contributions to 25 the school and Health Science Center.</p>
<p style="text-align: right;">Page 23</p> <p>1 Q. Right. Right. So, the methodology that you 2 just laid out for us, with respect to the 2016 study -- 3 A. Yes. 4 Q. -- did you find that there was a consistent 5 methodology for determining the UT effort for people who 6 also had a VA effort? 7 A. Yes. 8 Q. And what did you find? 9 A. The results of the study, overall, did not show 10 gender specific inequities. 11 Q. Is it possible, when you have those numbers 12 that are considered in the aggregate, that it wouldn't 13 encompass certain individuals that may have experienced 14 inequity in pay? 15 A. Yes. 16 Q. Have you seen that? 17 A. If there were outliers, the departments were 18 asked to explain those. 19 Q. Okay. So, let me ask you -- And I may need to 20 go -- 21 A. (Inaudible.) 22 Q. No, go ahead. No, go ahead. 23 A. Just high or low. If someone seemingly 24 appeared to be an outlier, high or low, th- -- it was -- 25 an explanation was requested.</p>	<p style="text-align: right;">Page 25</p> <p>1 Q. So, we have put on, as Exhibit 2 to the -- your 2 deposition, your affidavit, Dr. Williams. You see that? 3 A. Yes, sir. 4 Q. Okay. And if we can scroll down to your 5 signature, could you please verify that is in fact your 6 signature? 7 A. Yes, it is. 8 Q. So, I was asking you earlier about when 9 you're -- when you're doing these numbers in the 10 aggregate, that there's oftentimes individuals that 11 may -- I think you described it as an out- -- there 12 could be an outlier, but there's issues of -- of 13 potential pay inequity, even though the aggregate of the 14 numbers don't show a variance of -- that would qualify 15 as gender inequity; is that right? 16 A. Well, gender is an additional factor, and -- 17 but an outlier is high or low compared to the group, 18 whether it's the gender group or the faculty group as a 19 whole. 20 Q. Right. 21 A. So -- 22 Q. Well, let me ask this. Is there anything in 23 the affidavit that -- that you drafted that you would 24 change today? 25 A. This was my opinion, and it's still my opinion.</p>

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<p style="text-align: right;">Page 26</p> <p>1 Q. Let me a- -- Let me try to break it down a 2 little bit, so -- if I can. And the only reason I'm 3 breaking it down is -- I mean, we can all read what it 4 says, and it's your opinion. But it may very well be 5 that when the day comes when we have to try this 6 lawsuit, we may be showing your video and your testimony 7 today to a jury, rather than you being there live. You 8 with me on that; you understand that? 9 A. Yes, sir. 10 Q. Okay. And so, I'm just going to ask you a few 11 questions about the affidavit, to see if you can explain 12 it to where the jury can have a better understanding of 13 why this is your opinion. Okay? 14 Let's -- Let's start with the last 15 paragraph on Page 1. It states, in the last paragraph, 16 that your office has calculated compensation data for 17 approximately one thousand faculty members. Is that the 18 study that you and I have been visiting about for the 19 last hour or so? 20 A. Yes. 21 Q. Okay. Have you done any research studies on 22 diversity and inequality outside of U.T. Health? 23 A. No. 24 Q. So, your whole career has been here in 25 San Antonio, right?</p>	<p style="text-align: right;">Page 28</p> <p>1 have expressed in your affidavit improved at all since 2 you drafted the affidavit? 3 A. Yes. 4 Q. And why do you think that is? 5 A. We had a consultant firm, Huron, lead a 6 development group to ascertain the issues, and so needs 7 assessment, and then formulate a plan to improve -- 8 improve that. 9 Q. Okay. Do you -- What was the name of the 10 consulting firm? 11 A. Huron, like the lake. 12 Q. Like the what? 13 A. Lake. 14 Q. Oh, yeah, like the lake. Okay. 15 And do you remember when they were 16 engaged? 17 A. Maybe about 2018 or 2019. I think 20- -- I 18 don't know, right in there, 2018-2019ish. 19 Q. Did they provide a report, that you saw? 20 A. A partial report, because we went on to -- A 21 lot of changes have happened. We went on to improve the 22 operating system, in general, with the same consultant 23 group of the whole Health Science Center. And that's 24 wrapping up, and implementing centers of excellence in 25 various areas. And the data group -- data -- I'm going</p>
<p style="text-align: right;">Page 27</p> <p>1 A. That's correct. 2 Q. Okay. So, you state in this paragraph: Women 3 faculty members can be compensated less than their male 4 counterparts. More recently, efforts have been made to 5 analyze compensation data for detectable and systematic 6 discrepancies, although comparisons have been limited by 7 what the available data quality allows. 8 Could you explain that? 9 A. There's a desire by, at the time, UT system, 10 but a continued desire by our campus to be able to 11 substantiate equitable pay, and not have factors like 12 gender race ethnicity influencing those. However, data 13 collection and data access and data storage limit what 14 type of comparisons can be done. So, oftentimes the 15 closest one can get is a group number or a -- a large 16 group comparison. And the other thing is, faculty 17 careers, especially as you progress, become unique. And 18 so, you -- one needs to find other people that are doing 19 something similar in order -- it would be nice if also 20 more than one -- to make a valid comparison. And we 21 have not been able to have the capability to have the 22 data that would help us do that. So, that's what that 23 means by it's limited, despite desires. 24 Q. Understood. And so, has -- has the -- the data 25 collection, accessibility, storage concerns that you</p>	<p style="text-align: right;">Page 29</p> <p>1 to say improvement group -- was reconstituted at the -- 2 by the end of last year, to -- to work on improvements 3 again. 4 Q. So, it was kind of out with the old, in with 5 the new? 6 A. Well, it's been a slow transition. I mean, 7 we're -- it's been with a lot of thought and planning. 8 And so, yes. And I would say our leadership changed 9 also -- the Dean. And while Dr. Collins was recruited, 10 was with the interim Dean. Things were moving in that 11 direction. And the new Dean is interested in -- he- -- 12 data accuracy, precision. He is interested in research 13 and supporting faculty and diversity. 14 Q. And who's the new Dean? 15 A. Robert Hromas. 16 Q. Okay. 17 A. Spelled H-R-O-M-A-S. 18 Q. Got it. Good. 19 But you have seen a partial report from 20 Huron? 21 A. I've seen a -- Yes, more like minutes, I think, 22 but -- yes. 23 Q. Do you know how long that the consultant firm 24 was engaged and what their rules of engagement were? 25 A. No.</p>

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<p style="text-align: right;">Page 30</p> <p>1 Q. And would the Dean have been the individual 2 that engaged that firm? 3 A. I believe it was Andrea Marks or the 4 president's office in some form, because it was a Health 5 Science Center initiative. 6 Q. Okay. And their engagement was focused more 7 upon reliability, with respect to gathering data? 8 A. It was not exactly that. It was overall data 9 integrity. 10 Q. Okay. Data integrity that, heretofore, you 11 have indicated was problematic, right? 12 A. The -- The way data were collected was -- it 13 didn't facilitate a gender or race ethnicity salary 14 equity study -- any kind of salary equity study. It 15 wasn't -- The -- The way data -- You know, times change. 16 So, the way data were collected or stored, they were 17 collected or stored, for example, for salary accuracy -- 18 payroll accuracy, we'll say, or benefits accuracy, or -- 19 but they weren't created in a way -- because there 20 wasn't a such thing as salary equity studies. So, to be 21 more aligned, the intent, I'll say from my standpoint, 22 was to be able to enable all types of studies or data 23 used to support faculty, in all regards. 24 Q. I understand. If it's not -- If it -- If it's 25 not gender specific with respect to the data inputted,</p>	<p style="text-align: right;">Page 32</p> <p>1 School of Medicine. You state in your affidavit that 2 you have personally witnessed a pattern of gender 3 inequities and disrespect toward women faculty members 4 by male faculty members in leadership roles. And the 5 way I read this particular sentence is you're not really 6 limiting the opinion to pay equity, but rather, it's 7 more expansive, that there's actually what you have 8 witnessed to be a culture or pattern of gender-based 9 inequities. And so, am I correct in my interpretation, 10 this -- this extends beyond an opinion, as it relates to 11 Dr. Leykum and her salary reduction, to gender 12 discrimination in general? 13 A. So, in my career -- in my career here at this 14 institution, yes, I've personally witnessed gender 15 inequities. That's -- That's what I mean by that. 16 Q. Okay. And I'm trying to provide the jury a 17 historical perspective, you know, in terms of where you 18 were and where we are today. 19 A. Right. 20 Q. And, of course, Dr. Leykum, as a litigant in 21 this case, factored into this culture, as we have 22 alleged in this lawsuit. But I recall specifically 23 discussions relating to the Dean's predecessor. 24 A. The current Dean's predecessor? 25 Q. It's Dr. Francisco Scrano?</p>
<p style="text-align: right;">Page 31</p> <p>1 it's pretty hard to do a reliable gender equity study, 2 isn't it? 3 A. That's correct, yes. 4 MR. WATSON: How long have we been going, 5 about an hour? 6 MS. HATFIELD ASEL: A little over an hour. 7 About an hour. 8 MR. WATSON: We've been going a little 9 over an hour. Y'all want to take about a five-minute 10 break, refill our coffee? 11 THE WITNESS: That's fine. 12 MS. HILTON: Sure. I'm in. 13 MR. WATSON: Okay. How about 14 five minutes, Leesa? 15 THE COURT REPORTER: Okay. It is 16 10:29 a.m. We're going off the record. 17 (A recess was taken from 10:29 to 10:43.) 18 THE COURT REPORTER: Okay. It is 19 10:43 a.m. and we're going back on the record. 20 Q. (BY MR. WATSON) All right. We're back on 21 after a short break. Thank you. 22 We were walking through your affidavit, 23 Dr. Williams, and just having some explanation on some 24 facets of it. I want to drill down, again, just to get 25 the benefit of your 35 years of experience within the</p>	<p style="text-align: right;">Page 33</p> <p>1 A. Gonzalez-Scrano. 2 Q. Gonzalez-Scrano. Okay. And did you work with 3 him? 4 A. Yes. 5 Q. Okay. And what years was Dr. Francisco 6 Gonzalez-Scrano the Dean? 7 A. He was the Dean approximately six years, I 8 believe -- five years. And so, definitely 2011. And 9 there was an interim Dean maybe a year. And this 10 current Dean started the end of 2019. So, we're going 11 to say from -- for sure we'll say 2011 to 2017 or '18 -- 12 you know, late '17 or early '18. 13 Q. Okay. And did you believe, at the time -- and 14 we're going to go with the date under Dr. Francis 15 Gonzalez-Scrano's leadership -- that there was a culture 16 of gender discrimination? 17 MS. HILTON: Objection, form. 18 A. I do believe that Dr. Gonzalez-Scrano treated 19 men and women differently. 20 Q. (BY MR. WATSON) How so? 21 A. How so? He was more attuned to opinions 22 from -- from male leaders, and more -- just gave more 23 time and credibility, I would say, and credence to 24 advice and -- from male leaders, and was disrespectful 25 in regard to being more exclusionary to -- to women in</p>

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<p style="text-align: right;">Page 34</p> <p>1 leadership.</p> <p>2 Q. And he -- he -- Dr. Gonzalez-Scrano -- was the</p> <p>3 immediate predecessor of Dr. Reeves, correct?</p> <p>4 MS. HILTON: Objection, form.</p> <p>5 A. No, that's actually not correct.</p> <p>6 Q. (BY MR. WATSON) Dr. Hromas -- Dr. Hromas is</p> <p>7 what I meant to say.</p> <p>8 A. That's not correct either, in that there was an</p> <p>9 interim Dean for a period of time, until Dean Hromas was</p> <p>10 appointed, you know, through national competitive search</p> <p>11 and successful identification of the new Dean, and that</p> <p>12 was his -- I believe his appointment started, like,</p> <p>13 September of 2019. But his -- there was a period of</p> <p>14 overlap, so he could become familiar and start</p> <p>15 leadership in early 2020. So, there was an interim</p> <p>16 leadership, because Dr. Gonzalez-Scrano was not present.</p> <p>17 Q. You're referring to Dr. Ron Rodriguez?</p> <p>18 A. As the interim, yes.</p> <p>19 Q. Yes. Okay.</p> <p>20 You're familiar with the compensation plan</p> <p>21 that Dr. Reeves put in place upon his hire?</p> <p>22 A. Not intimately, because each department</p> <p>23 negotiated with the Dean and the then -- the -- I</p> <p>24 believe he was the vice Dean for finance. Anyway,</p> <p>25 the -- I don't -- might not have his correct title.</p>	<p style="text-align: right;">Page 36</p> <p>1 I don't know the timeframe you're talking about, but</p> <p>2 it's vetted. And it is an X, Y, Z plan, and it varies</p> <p>3 by department.</p> <p>4 Q. (BY MR. WATSON) Was Dr. -- To your knowledge,</p> <p>5 was Dr. Francisco Gonzalez-Scrano still employed in the</p> <p>6 School of Medicine when the compensation plan was put in</p> <p>7 place?</p> <p>8 MS. HILTON: Objection, lack of</p> <p>9 foundation.</p> <p>10 A. So, I will say -- I don't know what year you're</p> <p>11 talking about, but he -- when he was no longer serving</p> <p>12 in the Dean's role, he did continue to serve in a</p> <p>13 clinician role in his licensed and board certified role</p> <p>14 as a neurologist, but was not serving in a Dean's role</p> <p>15 or a leadership role.</p> <p>16 Q. (BY MR. WATSON) It's your recollection that --</p> <p>17 at least you believe that he left the School of Medicine</p> <p>18 in 2017; is that right?</p> <p>19 A. That's not right. He was in the clinician</p> <p>20 capacity for -- I'm -- I'm b- -- guessing, two years,</p> <p>21 I'll say, before he left.</p> <p>22 Q. Okay. So, would that have been 2019?</p> <p>23 A. Not sure. I didn't --</p> <p>24 Q. That's fine.</p> <p>25 In your -- In your statement that -- the</p>
<p style="text-align: right;">Page 35</p> <p>1 But, at that time, there was a person who's no longer</p> <p>2 here -- they left to take another position -- the Vice</p> <p>3 Dean for Finance. So, the Vice Dean for Finance and the</p> <p>4 Dean discussed and negotiated, came out with the final</p> <p>5 product for each department with that Department Chair.</p> <p>6 But I with was not included in those discussions.</p> <p>7 Q. And I -- I don't have any intention on asking</p> <p>8 you details of the compensation plan and the X, Y, Z</p> <p>9 components and all that jazz. I just -- My question was</p> <p>10 more focused on who was responsible for the</p> <p>11 implementation of the compensation plan --</p> <p>12 A. Okay.</p> <p>13 Q. -- (Inaudible.)</p> <p>14 A. The -- I would say a combination of the Chair</p> <p>15 of the Department and the Dean of the School of Medicine</p> <p>16 in conjunction with the Dean for Finance of the School</p> <p>17 of Medicine.</p> <p>18 Q. Okay. And the Dean -- Well, let me ask this.</p> <p>19 Dr. Francisco Gonzalez-Scrano was still working within</p> <p>20 the School of Medicine when the compensation plan was</p> <p>21 implemented, correct?</p> <p>22 MS. HILTON: Objection, lack of</p> <p>23 foundation. Objection, form.</p> <p>24 A. In general, every year the compensation plan is</p> <p>25 reviewed with the active Dean and Dean for Finance. So,</p>	<p style="text-align: right;">Page 37</p> <p>1 sentence that we're still on -- "I have personally</p> <p>2 witnessed a pattern of gender inequity with respect" --</p> <p>3 you mention specifically in leadership roles. Is that</p> <p>4 ref- -- I'm trying to understand a leadership role.</p> <p>5 Would that be a Dean and a Chair, or what other</p> <p>6 leadership roles would encompass that sentence?</p> <p>7 A. A leadership role, in general, means someone in</p> <p>8 the President's office, someone in the Dean's office,</p> <p>9 someone in the leadership of a department, from -- so,</p> <p>10 Chairs, Vice Chairs, Division Chief. However, I'm not</p> <p>11 saying that every one of those people was disrespectful.</p> <p>12 Q. Understood.</p> <p>13 A. But it does give one power -- or seeming power.</p> <p>14 Q. In the leadership role that you currently</p> <p>15 serve, and even prior to today, you've indicated that</p> <p>16 you've provided written and oral testimony on campus</p> <p>17 within the UT System; is that right?</p> <p>18 A. Yes.</p> <p>19 Q. Is that recorded somewhere?</p> <p>20 A. Not that I know of.</p> <p>21 Q. But your written testimony would -- would still</p> <p>22 exist, I presume.</p> <p>23 A. My written -- that -- that paragraph is a</p> <p>24 synopsis of -- in 1994, the then Chancellor, Cunningham,</p> <p>25 appointed a commission on the advancement of women.</p>

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<p style="text-align: right;">Page 38</p> <p>1 They had just concluded a similar commission with 2 campus -- representation from all U.T. campuses on the 3 status of minorities, that they had concluded that. In 4 that regard, my major testimony or work was compiled 5 into advice on promotion and tenure. And some promotion 6 and tenure-related policy came out of that, such as the 7 Stop the Clock policy that all UT System campuses put 8 into effect to allow the tenure clock to be stopped up 9 to two years for major life events, including births or 10 adoptions. So, that's what that is about. The other 11 written -- again, synopsis or oral testimony -- have to 12 do with the gender equity studies. So, I submitted my 13 synopsis of findings, and it was compiled into the 14 campus report of -- because other schools also followed 15 suit.</p> <p>16 Q. Okay. On the second page of your affidavit you 17 state that you believe that Dr. Leykum's complaints are 18 legitimate; is that right?</p> <p>19 A. In my personal opinion, yes.</p> <p>20 Q. And could you tell us why that is your opinion?</p> <p>21 A. As I mentioned before, she had an impeccable 22 and outstanding trajectory of leadership, of involvement 23 in discovery and research, in team building and -- and 24 building her -- the careers of her division, and in 25 fiscal responsibility for her division. And so, I -- it</p>	<p style="text-align: right;">Page 40</p> <p>1 need to be part of every transaction. Kindness is 2 another value that should be part of every transaction. 3 And so, when someone is about to undergo some change in 4 their appointment, I would say yes, a surprise is not 5 the right approach.</p> <p>6 Q. Are -- Are you aware that Luci believed that 7 when she questioned her salary reduction, in the context 8 of the compensation plan, that she felt that she was 9 ostracized after she started asking questions about it?</p> <p>10 MS. HILTON: Objection, form.</p> <p>11 A. No.</p> <p>12 Q. (BY MR. WATSON) Did you ever have any 13 discussions with Luci that she felt demoralized when she 14 tried to have constructive dialogue about her salary 15 reduction?</p> <p>16 MS. HILTON: Object to --</p> <p>17 A. No.</p> <p>18 MS. HILTON: -- form.</p> <p>19 Q. (BY MR. WATSON) In your capacity as the Vice 20 Dean for faculty, over the years, as I understand it, 21 faculty members, if they -- if they have a formal or 22 informal complaint, they would often be directed to your 23 office; is that right?</p> <p>24 A. Yes.</p> <p>25 Q. And they would be directed to your office for</p>
<p style="text-align: right;">Page 39</p> <p>1 said, I was surprised that -- to juxtapose that with a 2 salary reduction.</p> <p>3 Q. Well, aren't -- aren't salary reductions 4 typically, within the school, phased in?</p> <p>5 MS. HILTON: Objection, lack of 6 foundation.</p> <p>7 A. It depends. A salary reduction should be 8 discussed and justified. And it depends why a salary is 9 being decreased. So, in general, if a salary is 10 increased, it's as soon as possible. If a salary is 11 decreased, there is generally a warning, because most 12 people are -- are living to their salary, and would like 13 to plan ahead. So, that's -- that's that.</p> <p>14 Q. (BY MR. WATSON) If -- If a tenured faculty 15 member, such as yourself, were to ask questions and want 16 constructive dialogue as to why there was a sudden 17 salary reduction, should that individual that invited 18 those discussions be treated fairly without any form of 19 retaliation?</p> <p>20 MS. HILTON: Objection, calls for 21 speculation.</p> <p>22 Q. (BY MR. WATSON) If you want to assume that 23 that's a hypothetical, that's fine.</p> <p>24 A. So, fairness is definitely a value that is 25 something my office and others believe to be -- really</p>	<p style="text-align: right;">Page 41</p> <p>1 the purpose of investigating the complaint, right?</p> <p>2 MS. HILTON: Objection, form.</p> <p>3 A. Maybe not. Some things are in my purview. The 4 purpose would be for me to direct them to possibly a 5 better person. It could be depending on the nature of 6 the complaint, if it's -- we have someone who 7 specifically deals with Title 9 or Title 7 or 8 ombudspersons things.</p> <p>9 Q. Okay.</p> <p>10 A. So, it's more to facilitate the -- a better 11 approach, which might include me, certainly.</p> <p>12 Q. Okay.</p> <p>13 A. If I (inaudible) --</p> <p>14 Q. Yeah, okay. But you're kind of a 15 clearinghouse, for lack of a better description. 16 They're directed to you, and if it's a Title 9 or 17 Title 7, you might direct them to Title 9 compliance or 18 to HR, but it may well be something that falls in your 19 lap?</p> <p>20 A. Right.</p> <p>21 Q. If someone were directed to your office and 22 said they felt like they were being retaliated against, 23 is that something that you would direct to someone else 24 or that you would undertake investigating?</p> <p>25 MS. HILTON: Objection, calls for</p>

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<p style="text-align: right;">Page 42</p> <p>1 speculation.</p> <p>2 A. It's a gray zone. So, probably both.</p> <p>3 Q. (BY MR. WATSON) Okay. In other words, you --</p> <p>4 you might do an investigation, and also direct them to</p> <p>5 HR? Or who would -- who would be the person that you</p> <p>6 would send them to?</p> <p>7 A. We actually have an office related to</p> <p>8 Title 9, and -- and Title 7, separately. One is</p> <p>9 Dr. Calfus (phonetic), and the other is Dr. Mock, who's</p> <p>10 also the Vice President for Academic Faculty and Student</p> <p>11 Affairs.</p> <p>12 Q. Okay. When does HR get involved? If there,</p> <p>13 hypothetically, is a complaint by a woman of</p> <p>14 discrimination or retaliation, in any form, at what</p> <p>15 point --</p> <p>16 A. (Inaudible.)</p> <p>17 Q. Go ahead. I'm sorry.</p> <p>18 A. They govern staff.</p> <p>19 Q. All right. Okay.</p> <p>20 A. And they would also advise on the right context</p> <p>21 for benefits advice, for faculty. That's where they get</p> <p>22 involved with faculty.</p> <p>23 Q. Do you believe that it's important to try to</p> <p>24 follow the processes within the policies when there's a</p> <p>25 complaint of discrimination or retaliation?</p>	<p style="text-align: right;">Page 44</p> <p>1 our institution tries very hard to identify the best</p> <p>2 candidate, most suitable for that role. Whether or not</p> <p>3 they're successful is -- is another question.</p> <p>4 Q. Do you believe there's ever been occasions,</p> <p>5 Dr. Williams, where they had a -- selected a -- as a</p> <p>6 predetermined -- a white individual for a leadership</p> <p>7 role -- a white male?</p> <p>8 MS. HILTON: Objection, form.</p> <p>9 A. In my entire career?</p> <p>10 Q. (BY MR. WATSON) No, just in just in the</p> <p>11 last -- just in the last few years.</p> <p>12 MS. HILTON: I'm sorry, Kyle, I'm having</p> <p>13 some audio problems. What was the question? I'm</p> <p>14 hearing, like, some e-mail alerts or something.</p> <p>15 MR. WATSON: Yeah, I'm hearing the same</p> <p>16 thing, Amy. It's not me.</p> <p>17 MS. HILTON: Yeah, it's not me either,</p> <p>18 but -- Sorry, I don't mean to interrupt, but I did not</p> <p>19 hear the question.</p> <p>20 MR. WATSON: No, that's all right. I</p> <p>21 understand. I'm having the same distraction. I hope</p> <p>22 it's not me. I say that, and -- It reminds me of the</p> <p>23 time where I told the federal judge, "It's not my</p> <p>24 phone," and I told him three times, but it was. But --</p> <p>25 MS. HUNT: It's not me either, just --</p>
<p style="text-align: right;">Page 43</p> <p>1 A. Following policies is definitely something I</p> <p>2 advise.</p> <p>3 Q. I know these questions sound dumb, but just</p> <p>4 bear with me.</p> <p>5 By the way, Dr. Williams, did -- did you</p> <p>6 ask for a lawyer to be appointed to represent you?</p> <p>7 A. No.</p> <p>8 Q. Have you ever served on a Faculty Search</p> <p>9 Committee?</p> <p>10 A. No, I haven't.</p> <p>11 Q. Do -- Well, why not, if -- Is there a reason</p> <p>12 why you haven't?</p> <p>13 A. I have interviewed people, but I haven't served</p> <p>14 on the main search committee. And probably -- I don't</p> <p>15 know. It would be conjecture. I think it's because I</p> <p>16 have a full plate.</p> <p>17 Q. I understand. No, I understand that.</p> <p>18 Let me ask you this, just in terms of</p> <p>19 contextually. In terms of leadership roles, based upon</p> <p>20 your experience and training within the school to arrive</p> <p>21 at the position that you are today, do you believe or</p> <p>22 have you formulated an opinion that institutionally the</p> <p>23 leadership roles are always filled with the most</p> <p>24 qualified candidates?</p> <p>25 A. I would say that is the intent. And I think</p>	<p style="text-align: right;">Page 45</p> <p>1 just for the record.</p> <p>2 MR. WATSON: Uh, I don't even know what my</p> <p>3 question --</p> <p>4 Q. (BY MR. WATSON) Oh, okay. So, in the last few</p> <p>5 years, have you had discussions with -- with your female</p> <p>6 counterparts, at least within the school, that there's a</p> <p>7 perception that the school frequently has predetermined</p> <p>8 selections of white men doctors for leadership roles?</p> <p>9 MS. HILTON: Objection, form.</p> <p>10 A. I can't say this was a frequent discussion.</p> <p>11 And since I'm not on the search committees, and there</p> <p>12 are much more -- many more white men available to be</p> <p>13 appointed in leadership roles, I would say that's a</p> <p>14 suspicion, at times.</p> <p>15 Q. (BY MR. WATSON) Are you aware of there being</p> <p>16 men hired just with a foe search, any individuals that</p> <p>17 you're aware of?</p> <p>18 MS. HILTON: Objection, form.</p> <p>19 A. No, I'm not.</p> <p>20 Q. (BY MR. WATSON) Do you know Dr. Donald</p> <p>21 Dougherty?</p> <p>22 A. Dougherty, yes.</p> <p>23 Q. What knowledge do you have, if any,</p> <p>24 Dr. Williams, as to the treatment of Luci by Dr. Reeves</p> <p>25 after the salary reduction?</p>

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Pages 46 to 49

<p style="text-align: right;">Page 46</p> <p>1 A. I don't have details of that.</p> <p>2 Q. Do you have any knowledge -- and I promised</p> <p>3 that I wouldn't get into any details on the compensation</p> <p>4 plan as it relates to X, Y and Z, and I intend to stay</p> <p>5 committed to that, but -- Part of the analysis in the X,</p> <p>6 Y, Z composition is a percent effort calculation, right?</p> <p>7 A. Yes.</p> <p>8 Q. Do you have an understanding of how that</p> <p>9 percent effort calculation is derived, or is it fairly</p> <p>10 subjective?</p> <p>11 MS. HILTON: Objection, lack of</p> <p>12 foundation.</p> <p>13 A. So, generally -- or for UT faculty roles, every</p> <p>14 day of work is 20 percent, so that when you have five</p> <p>15 days of work it's a hundred percent. So, you're working</p> <p>16 toward a 1.0 full-time equivalent. And there are other</p> <p>17 factors that -- that contribute to building that 1.0</p> <p>18 full-time equivalent, which means you work full-time.</p> <p>19 So, that also, when you're a faculty member, your nights</p> <p>20 and weekends are rolled into that. It doesn't --</p> <p>21 You're -- you're exempt from, you know, clocking in and</p> <p>22 saying, I'm working 9:00 to 5:00. So, all of your time,</p> <p>23 no matter when it happens, rolls into that thought.</p> <p>24 That's --</p> <p>25 So, now maybe you can repeat your question</p>	<p style="text-align: right;">Page 48</p> <p>1 A. The pers -- The individual faculty member.</p> <p>2 The -- Any cross or joint appointments sign that -- it's</p> <p>3 an acknowledgment, at least, that their part is correct,</p> <p>4 if they're paying for, or not, part of the salary. It</p> <p>5 goes through the Finance Dean. It goes through our</p> <p>6 office for general correctness of the form, not --</p> <p>7 Q. Okay.</p> <p>8 A. -- of the numbers that are on the form, and</p> <p>9 correctness and completion of the form, through the</p> <p>10 Finance Dean and the Dean of the school. And then it</p> <p>11 goes to the Chief Financial Officer and the Vice</p> <p>12 President for Academic Faculty and Student Affairs, and</p> <p>13 to the President, ultimately.</p> <p>14 Q. If someone receives compensation for work done</p> <p>15 at the VA, does that affect what they are paid by the</p> <p>16 U.T. Health?</p> <p>17 MS. HILTON: Objection, lack of</p> <p>18 foundation.</p> <p>19 A. It does, or can, and has, in that that</p> <p>20 supplants a portion of that FTE, that percent.</p> <p>21 Depending -- It needs to be structured to represent what</p> <p>22 they are doing there. It's not a -- necessarily, a 1 to</p> <p>23 1 ratio, and it doesn't need to be -- It's -- It's very</p> <p>24 complex, depending on the role at the VA. As a matter</p> <p>25 of fact, I'll just say, that has been -- I've been</p>
<p style="text-align: right;">Page 47</p> <p>1 and I can see if I answered it.</p> <p>2 Q. Well, the ultimate decision maker on the</p> <p>3 percent effort is Dr. Reeves, right?</p> <p>4 MS. HILTON: Objection, lack of</p> <p>5 foundation.</p> <p>6 A. For the Department of Medicine, since he serves</p> <p>7 as Chair of the Department of Medicine.</p> <p>8 Q. (BY MR. WATSON) That -- That's right, he's the</p> <p>9 ultimate decision maker in calculating a tenured</p> <p>10 professor's percentage of effort?</p> <p>11 MS. HILTON: Same objection.</p> <p>12 A. It's what he wrote down, and was agreed upon</p> <p>13 with finance and the various levels of agreement for a</p> <p>14 person to go into the Human Capital Management System of</p> <p>15 Records. And a person, now -- and maybe then, I don't</p> <p>16 know -- I believe so -- signs that they're aware of this</p> <p>17 calculation. And if -- That's basically it. If they're</p> <p>18 a full-time faculty member, it needs to add up to 1.</p> <p>19 Q. (BY MR. WATSON) So, when you say "person," who</p> <p>20 signs off on it? Who were you referring to, the</p> <p>21 "person"?</p> <p>22 MS. HILTON: Objection, lack of</p> <p>23 foundation.</p> <p>24 A. The Chair.</p> <p>25 Q. (BY MR. WATSON) Right.</p>	<p style="text-align: right;">Page 49</p> <p>1 working for quite a few years straight on that issue,</p> <p>2 trying to add clarity and consistency for across our</p> <p>3 schooling campus.</p> <p>4 Q. Yeah, I will -- I will grant you the</p> <p>5 complexity. Will agree with you, wholeheartedly, on</p> <p>6 that. I seems like it's also pretty fact specific; is</p> <p>7 that right?</p> <p>8 A. It's what specific?</p> <p>9 Q. Fact specific, person specific.</p> <p>10 A. Oh.</p> <p>11 Q. Because there's so many variables at play.</p> <p>12 A. Yes. Yes. It's -- It is -- Yeah, it's quite</p> <p>13 complex, so --</p> <p>14 Q. So, let me ask this. And I'm going to try to</p> <p>15 ask this in an understandable way. But when -- when you</p> <p>16 indicate that the compensation for work done at the VA</p> <p>17 supplants or it's -- it's in addition to what the salary</p> <p>18 may be at UT, in order to arrive at a -- a full-time</p> <p>19 equivalent of 1; is that right?</p> <p>20 MS. HILTON: Objection, lack of</p> <p>21 foundation. Objection, form.</p> <p>22 A. It's not necessarily a 1 to 1 -- It's very --</p> <p>23 very, like you said, person or role specific. So,</p> <p>24 there's leeway in interpretation and application of how</p> <p>25 that happens.</p>

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<p style="text-align: right;">Page 50</p> <p>1 Q. (BY MR. WATSON) So, in terms of leeway int- --</p> <p>2 and in terms of interpretation, application, process in</p> <p>3 deriving a salary with UT --</p> <p>4 MS. HILTON: Objection, form.</p> <p>5 Q. (BY MR. WATSON) -- if a --</p> <p>6 MS. HILTON: I'm sorry. I'm sorry. Go</p> <p>7 ahead, Kyle. I apologize.</p> <p>8 MR. WATSON: That's all right.</p> <p>9 Q. (BY MR. WATSON) If a -- an individual</p> <p>10 disagrees with a -- for example, percentage allocation,</p> <p>11 they have a right to appeal that to a Compensation</p> <p>12 Committee; is that right?</p> <p>13 A. Yes.</p> <p>14 Q. Do you have any knowledge of the letter --</p> <p>15 Well, let me ask this before I ask that.</p> <p>16 Are you aware that Dr. Leykum appealed her</p> <p>17 salary reduction in the manner by which it was</p> <p>18 reduced --</p> <p>19 A. No.</p> <p>20 Q. -- to the Compensation Committee?</p> <p>21 A. No, I didn't.</p> <p>22 Q. Okay. Then that takes care of the next</p> <p>23 question. You, then, presumably, are not aware of</p> <p>24 Dr. Reeves sending a letter to the Compensation</p> <p>25 Committee when Luci appealed her reduction?</p>	<p style="text-align: right;">Page 52</p> <p>1 Dr. Leykum would not be included in this report, right?</p> <p>2 A. We didn't study individuals, per se, but since</p> <p>3 it's fiscal year 27 (sic) data, she would be included in</p> <p>4 that.</p> <p>5 Q. I thought Division Chiefs were excluded.</p> <p>6 A. They were not included in the 2015-2016 report.</p> <p>7 Q. Okay.</p> <p>8 A. In this one they were not specifically</p> <p>9 excluded. But other leadership, center directors,</p> <p>10 Deans, Chairs were.</p> <p>11 Q. Okay. And so -- And this, I guess, kind of</p> <p>12 addresses my question earlier. On the one hand you</p> <p>13 believe that Luci was a male (sic) -- was a victim of --</p> <p>14 of a gender inequity by virtue of your affidavit, but</p> <p>15 when you consider in aggregate, a total volume, then it</p> <p>16 may -- it may skew individual determination or data,</p> <p>17 right?</p> <p>18 MS. HILTON: Objection, form.</p> <p>19 A. Aggregate data does have a possibility of</p> <p>20 skewing individual data. However, when this was -- I</p> <p>21 don't know, but I'm presuming she was included in there,</p> <p>22 because it's 2017 data. Any -- Any -- Either her salary</p> <p>23 was within the range of other people or she was an</p> <p>24 outlier, and it was explained by productivity and not</p> <p>25 gender. That's -- That's basically your -- your rank,</p>
<p style="text-align: right;">Page 51</p> <p>1 A. No, I'm not. I only am aware of her reduction</p> <p>2 because, I said, the form comes across my desk for are</p> <p>3 the blanks filled in correctly and completely. But I</p> <p>4 don't -- I'm not involved in the negotiations or appeal</p> <p>5 or that part of it, because I'm not finance.</p> <p>6 Q. Let me take a couple minutes to look at my</p> <p>7 notes. I think I might be finished in -- in my</p> <p>8 questions.</p> <p>9 A. All right.</p> <p>10 MR. WATSON: Thank you.</p> <p>11 THE COURT REPORTER: It is 11:26 a.m. and</p> <p>12 we're going off the record.</p> <p>13 (A recess was taken from 11:26 to 11:34.)</p> <p>14 THE COURT REPORTER: It is 11:34 a.m. and</p> <p>15 we're going back on the record.</p> <p>16 Q. (BY MR. WATSON) Just a couple more quick</p> <p>17 questions. I'm going to mark as Exhibit 3 something</p> <p>18 that we received last night from the Defendant, which is</p> <p>19 a -- entitled Fiscal Year 2018 Gender Pay Equity Report.</p> <p>20 A. Yes.</p> <p>21 Q. Now, when you and I were visiting earlier,</p> <p>22 Janet, you mentioned the -- a 2018 report. Would this</p> <p>23 be that report?</p> <p>24 A. Yes, this is the overall campus summary.</p> <p>25 Q. Okay. Very good. And just to be clear,</p>	<p style="text-align: right;">Page 53</p> <p>1 your area of practice, your time and rank, your -- you</p> <p>2 know -- and your -- your productivity for that time.</p> <p>3 So, I don't know if that's a yes or no, but -- Aggregate</p> <p>4 data do not allow granular comparisons.</p> <p>5 Q. (BY MR. WATSON) Yeah, I think we were trying</p> <p>6 to -- that's what I was trying to ask earlier, was how</p> <p>7 you're able to isolate an individual when you have an</p> <p>8 aggregate analysis. And I think that you did answer</p> <p>9 that. But when you talk about outliers, is there a --</p> <p>10 When you have these reports -- You'd mentioned earlier</p> <p>11 that if you have an outlier, then there's a discussion</p> <p>12 with the department or there's a discussion with someone</p> <p>13 about why that outlier exists.</p> <p>14 A. Yes.</p> <p>15 Q. Remember that discussion?</p> <p>16 A. There were discussions for people that were</p> <p>17 identified that -- as outliers, and I was not involved</p> <p>18 in those, only to hear the results. Those were</p> <p>19 discussed with the Dean and the Finance Dean. And it's</p> <p>20 controlled by the leadership of that department.</p> <p>21 Q. So, I -- Go ahead. I'm sorry, I interrupted</p> <p>22 you.</p> <p>23 A. So, the data are d- -- identified. But early</p> <p>24 on they have to be identified to figure out who is it</p> <p>25 that's up here or down here, compared to the rest of the</p>

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<p style="text-align: right;">Page 54</p> <p>1 group. So, that's what I mean by outliers. Because --</p> <p>2 Q. Do you -- Go ahead.</p> <p>3 A. Th- -- There are always asks for an</p> <p>4 explanation, but that's the subjective part.</p> <p>5 Q. Do you know whether or not Luci was flagged as</p> <p>6 a problem?</p> <p>7 A. I don't know.</p> <p>8 Q. Is there a -- in writing, some -- someplace,</p> <p>9 that identifies outliers in these studies?</p> <p>10 A. No.</p> <p>11 Q. No?</p> <p>12 A. Huh-uh.</p> <p>13 Q. So, will there be e-mails that would identify</p> <p>14 the outliers? I mean, the outliers --</p> <p>15 A. Not -- Not that I'm involved in. They would be</p> <p>16 a discussion with, like I said, the Chair, the -- or</p> <p>17 possibly Division Chief, depending on department, the</p> <p>18 Dean at the time, and the Finance Dean at the time.</p> <p>19 Q. At the time that this report was generated,</p> <p>20 since it's generated on 2017 data, presumably this is</p> <p>21 before the Ur- -- Huron engagement, right?</p> <p>22 A. I think it was contemporaneous with that,</p> <p>23 because the Huron engagement was -- was instigated by</p> <p>24 the fact that we needed to do another -- and wanted to</p> <p>25 do another Gender Pay Equity Report, and it was so</p>	<p style="text-align: right;">Page 56</p> <p>1 A. So, the meetings were, I would say, at the same</p> <p>2 time, but we had to move along, because this report was</p> <p>3 requested by U.T. System. So, we had a deadline that we</p> <p>4 actually missed, in trying to get the best data we</p> <p>5 could. And -- And that was understood by our</p> <p>6 administration, that we're -- we're trying to do our</p> <p>7 best, because our school is to huge, to make these</p> <p>8 comparisons. And -- But Huron was why we engaged Huron,</p> <p>9 because we knew we needed to improve, but we couldn't</p> <p>10 get the improvements fast enough to affect this report.</p> <p>11 But --</p> <p>12 Q. I understand that.</p> <p>13 A. -- I want to say that we -- we, to the best of</p> <p>14 our ability, did what we could to make this a legitimate</p> <p>15 and verifiable report.</p> <p>16 Q. Understood. But -- But the methodology that</p> <p>17 you utilized in your 2016 report was the same as what</p> <p>18 was utilized in --</p> <p>19 A. Yes, except that Division Chiefs are not listed</p> <p>20 as exclusionary --</p> <p>21 Q. I --</p> <p>22 A. -- (interruption) excluded.</p> <p>23 Q. I'm -- I'm speaking specifically with respect</p> <p>24 to the -- the data gathering that was utilized in the --</p> <p>25 A. Oh, yes. Yes. I mean, we had the same</p>
<p style="text-align: right;">Page 55</p> <p>1 difficult to do it the first time. So, it didn't come</p> <p>2 to any conclusions that could affect this. We still had</p> <p>3 to do it with the same challenges. But it was</p> <p>4 contemporaneous with that.</p> <p>5 Q. So, I guess my question would be, with respect</p> <p>6 to the concerns we had with data collection,</p> <p>7 accessibility, storage, and the limitations we had on</p> <p>8 comparisons between genders, had that been instituted in</p> <p>9 connection with the 2017 data, it's -- my understanding</p> <p>10 is the consultant came after that date. So, I'm just</p> <p>11 trying to clarify in my mind whether or not the data</p> <p>12 integrity issue was resolved.</p> <p>13 A. I believe we -- the data integrity is something</p> <p>14 we're still working on. To the best of our ability,</p> <p>15 this was done for that -- the best comparison we could</p> <p>16 have, at the time. But whether or not Dr. Leykum was an</p> <p>17 outlier, I don't know.</p> <p>18 Q. I understand that. I'm just trying to</p> <p>19 determine -- you know, the jury's going to want to know</p> <p>20 the reliability of the data. And if the constructive</p> <p>21 measures that were implemented, post first report and</p> <p>22 perhaps this report, by the consultant took place either</p> <p>23 contemporaneous or subsequent to this or prior to this,</p> <p>24 but I can't -- I don't know which, so -- I just wondered</p> <p>25 if you --</p>	<p style="text-align: right;">Page 57</p> <p>1 PeopleSoft and payroll system, Human Capital Management</p> <p>2 systems from which we needed to extract them. And,</p> <p>3 actually, we did a regression analysis on this one that</p> <p>4 we did not do, which added integrity to it -- or that</p> <p>5 was the intent. We didn't find any more information</p> <p>6 related that -- over time, we wanted to see if time was</p> <p>7 a factor. So, yes, the methodology was the same, if not</p> <p>8 better.</p> <p>9 Q. Is the same -- Is the same system in place</p> <p>10 today?</p> <p>11 A. Which system?</p> <p>12 Q. You mentioned a software system that was used</p> <p>13 in addition to the regression analysis. Is that --</p> <p>14 A. It's -- It's a -- PeopleSoft or Human Capital</p> <p>15 Management is a large term, and there are capabilities</p> <p>16 in that that get improved and updated. So, it is the</p> <p>17 same -- PeopleSoft, Human Capital Management system, but</p> <p>18 there are more capabilities now.</p> <p>19 Q. Very good. Thank you so much. It's good to</p> <p>20 see you, also.</p> <p>21 MR. WATSON: I'll pass the Witness, at</p> <p>22 this time.</p> <p>23 MS. HILTON: Since we have our deposition</p> <p>24 noticed with Dr. Williams at 1:30, I think we'll just</p> <p>25 wait until that time to do our questions. Thank you,</p>

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1 Dr. Williams.

2 THE WITNESS: Thank you.

3 MR. WATSON: Okay. Thank you, Dr.

4 Williams.

5 THE COURT REPORTER: Okay. Ms. Hilton,

6 did you need a copy of this deposition?

7 MS. HILTON: Yes, please.

8 THE WITNESS: I'm sorry, I didn't

9 understand what you said, Leesa.

10 THE COURT REPORTER: It's okay,

11 Dr. Williams, I'm just asking the attorneys a question

12 real quick at the end here. And, Rosalind, did you need

13 a copy of this deposition?

14 MS. HUNT: We don't want to purchase a

15 copy. I'd like it to be e-mailed to me for the purpose

16 of reviewing it, for the Witness to review it for

17 accuracy.

18 THE COURT REPORTER: Okay.

19 MS. HUNT: And I can provide you with my

20 e-mail.

21 THE COURT REPORTER: Okay. It is

22 11:47 a.m. and we're going off the record.

23 (Deposition concluded at 11:47 a.m.)

24 * * * * *

25

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IN THE UNITED STATES DISTRICT COURT
FOR THE WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION

LUCI LEYKUM, M.D.,)
)
Plaintiff(s))
) CIVIL ACTION

VS.) NO. 5:20-cv-00478-OLG
)

THE UNIVERSITY OF TEXAS)
HEALTH SCIENCE CENTER AT)
SAN ANTONIO,)
)

Defendant(s))

CERTIFICATE FROM THE
ORAL/VIDEO CONFERENCE DEPOSITION OF
JANET WILLIAMS, M.D.

April 28, 2021

I, LEESA L. PARKER, a Certified Shorthand
Reporter in and for the State of Texas, hereby certify
to the following:

That the Witness, JANET WILLIAMS, M.D., was
duly sworn by the officer and that the transcript of the
oral deposition is a true record of the testimony given
by the Witness.

I further certify that pursuant to FRCP Rule 30
(f)(1) that the signature of the Deponent:
X was requested by the Deponent or a party
before the completion of the deposition and is to be
returned within 30 days from date of receipt of the
transcript.

Page 59

1 CHANGES AND SIGNATURE
2 RE: LUCI LEYKUM, M.D. VS. THE UNIVERSITY OF TEXAS
3 HEALTH SCIENCE CENTER AT SAN ANTONIO

4 PAGE	LINE	CHANGE	REASON
5			
6			
7			
8			
9			
10			
11			

12 I, JANET WILLIAMS, M.D., have read the
13 foregoing deposition and hereby affix my signature that
14 same is true and correct, except as noted above.


15 _____
16 JANET WILLIAMS, M.D., Witness

17 THE STATE OF _____)
18 COUNTY OF _____)

19 Before me, _____, on this day
20 personally appeared JANET WILLIAMS, M.D., known to me
21 (or proved to me under oath or through _____)
22 (description of identity card or other document) to be
23 the person whose name is subscribed to the foregoing
24 instrument and acknowledged to me that they executed the
25 same for the purposes and consideration therein
expressed.

26 Given under my hand and seal of office this
_____ day of _____, _____.
27
28
29 _____
30 Notary Public in and for the
State of _____.

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1 If returned, the attached Changes and Signature
2 Page contains any changes and the reasons therefor;
3 _____ was not requested by the Deponent or a
4 party before the completion of the deposition.
5 I further certify that I am neither attorney,
6 nor counsel for, related to, nor employed by any of the
7 parties to the action in which this testimony is taken.
8 Further, I am not a relative or employee of any attorney
9 of record in this cause, nor do I have a financial
10 interest in the action.
11 Certified to by me this _____ day of
12 _____, 2021.
13 
14 _____
15 LEESA L. PARKER, Texas CSR 5343
16 Expiration Date: 07/31/2022
17 KIM TINDALL & ASSOCIATES, LLC
18 Firm Registration No. 631
19 (210) 697-3400
20
21
22
23
24
25

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STATE OF TEXAS

§

COUNTY OF Bexar

§

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BEFORE ME, the undersigned authority, appeared Dr. Janet Williams, who after being by me duly sworn, stated the following under oath:

“My name is Dr. Janet Williams. I am over the age of 18 years old and I am competent to make this affidavit. The statements of fact as set forth herein are true and correct, and are within my personal knowledge.

“I am currently the Vice Dean for Faculty at the Long School of Medicine of the University of Texas Health Science Center at San Antonio. During my time working at this institution, I have personally witnessed a pattern of gender inequities and disrespect toward women faculty members by male faculty members in leadership roles.

“Over my years as a faculty member rising into leadership, I have provided written and oral testimony on the campus, the UT System and national levels about the status of women in the biomedical sciences. My participation in these roles has informed my perspective on the gender inequities that occur within the University of Texas Health Science Center at San Antonio (UTHSA).

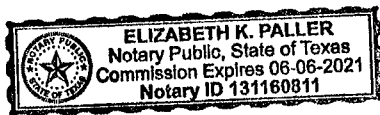
“I am personally acquainted with salary inequities that have existed and can occur within the UTHSA Long School of Medicine. Women faculty members can be compensated less than their male counterparts. More recently, efforts have been made to analyze compensation data for detectable and systematic discrepancies, although comparisons have been limited by what the available data quality allows. My office has calculated the compensation comparison data for approximately 1,000 faculty members.

"I am personally acquainted with Dr. Luci Leykum and am familiar with the complaints she has raised regarding the disparate treatment she received from leadership during her tenure with the UTHSA and believe her complaints to be legitimate. Dr. Leykum was beloved by her colleagues, and the faculty in her Division considered her to be an outstanding supervisor and mentor. Dr. Leykum also led her Division in such a way that it was known to be more financially stable than other Divisions. Nevertheless, I believe that Dr. Leykum was subject to a male power hierarchy that reduced her salary under conditions not applied to male faculty with similarly calculated salaries and who were not subject to the same power structure. I believe Dr. Leykum to be an example of the system-perpetuated gender inequities that exist within the University of Texas Health Science Center at San Antonio."

Further affiant sayeth not.


Dr. Janet Williams

SUBSCRIBED AND SWORN TO BEFORE ME on November 26, 2019, by Dr. Janet Williams.




Notary Public, State of Texas

Transcript of the Testimony of
Janet Williams, M.D.

Date:

April 28, 2021

Case:

Luci Leykum vs University of Texas Health Science Center

Janet Williams, M.D.

April 28, 2021

IN THE UNITED STATES DISTRICT COURT
FOR THE WESTERN DISTRICT OF TEXAS
SAN ANTONIO DIVISION

LUCI LEYKUM, M.D.,)
)
Plaintiff(s))
) CIVIL ACTION
VS.) NO. 5:20-cv-00478-OLG
)
THE UNIVERSITY OF TEXAS)
HEALTH SCIENCE CENTER AT)
SAN ANTONIO,)
)
Defendant(s))

ORAL/VIDEO CONFERENCE DEPOSITION OF

JANET WILLIAMS, M.D.

APRIL 28, 2021
(Reported remotely)

ORAL/VIDEO CONFERENCE DEPOSITION of JANET

WILLIAMS, M.D., produced as a Witness at the instance of the Defendant, and duly sworn, was taken in the above-styled and numbered cause the 28th day of April, 2021, from 1:37 p.m. to 2:39 p.m., before Leesa L. Parker, CSR in and for the State of Texas, reported remotely by machine shorthand, pursuant to the Federal Rules of Civil Procedure, and the provisions stated on the record or attached hereto.

Janet Williams, M.D.

April 28, 2021
Pages 2 to 5

<p style="text-align: right;">Page 2</p> <p style="text-align: center;">A P P E A R A N C E S</p> <p>(Appearing remotely via Videoconference)</p> <p>FOR THE PLAINTIFF(S):</p> <p>Mr. Kyle C. Watson Ms. Kennedy Hatfield Asel GOODE, CASSEB, JONES, RIKLIN, CHOATE & WATSON, PC 2122 North Main Avenue San Antonio, Texas 78212</p> <p>FOR THE DEFENDANT(S):</p> <p>Ms. Amy S. Hilton Ms. Emily Ardolino OFFICE OF THE ATTORNEY GENERAL OF TEXAS Capitol Station P.O. Box 12548 Austin, Texas 78711</p> <p>FOR THE DEPONENT:</p> <p>Ms. Rosalind Hunt OFFICE OF THE ATTORNEY GENERAL OF TEXAS Capitol Station P.O. Box 12548 Austin, Texas 78711</p> <p>The Zoom Attendant/Videographer: MR. TREY GRUN Also Present: MR. MATTHEW GROVE, MS. LUCI LEYKUM, MS. ANA VIEIRA AYALA, MR. JACK PARK</p> <p style="text-align: center;">* * * * *</p>	<p style="text-align: right;">Page 4</p> <p>(Deposition Proceedings commencing at 1:37 p.m. Reading of the Federal setup is waived.</p> <p>Exhibits, if any, will be produced with the transcript, unless otherwise noted on the record. Any other agreements, if any, will be stated on the record.)</p> <p>THE COURT REPORTER: We are on the record.</p> <p>Today's date is April 28, 2021, and the time is 1:36 p.m. This is the deposition of Janet Williams, and it is being conducted remotely, by agreement of the parties. My name is Leesa Parker, Texas CSR No. 5343. I am administering the oath and reporting the deposition remotely, by stenographic means, from my residence in Helotes, Texas.</p> <p>Would Counsel please state their appearances for the record, and I will swear in the Witness.</p> <p>MS. HILTON: Amy Hilton and Emily Ardolino, for the University of Texas at San Antonio Health Science Center.</p> <p>MR. WATSON: Kyle Watson, Kennedy Hatfield Asel, for Dr. Luci Leykum.</p> <p>MS. HUNT: Rosalind Hunt, for Dr. Williams.</p> <p>JANET WILLIAMS, M.D., having been first duly sworn, testified as follows:</p>
<p style="text-align: right;">Page 3</p> <p style="text-align: center;">I N D E X</p> <p style="text-align: right;">PAGE</p> <p>Appearances 2</p> <p>Stipulations (Attached hereto) N/A</p> <p>WITNESS: JANET WILLIAMS, M.D.</p> <p>Examination by Ms. Hilton..... 4</p> <p>Changes and Signature 33</p> <p>Reporter's Certificate 34</p> <p style="text-align: center;">E X H I B I T S</p> <p style="text-align: right;">PAGE</p> <p>NO. DESCRIPTION FIRST REFERENCED</p> <p>1 6 2016 Faculty Compensation Equity Final Report</p> <p>2 11 2018 LSOM Gender Pay Equity and Race-Hispanic Ethnicity Pay Equity Analyses</p> <p>3 22 Affidavit of Janet Williams, M.D.</p> <p style="text-align: center;">* * * * *</p>	<p style="text-align: right;">Page 5</p> <p style="text-align: center;">E X A M I N A T I O N</p> <p>BY MS. HILTON:</p> <p>Q. Dr. Williams, thanks for being with us this afternoon. I don't anticipate taking very long with you at all. I know that -- I'm sure we would all like to do something else with our afternoon, so I'm going to move through my questions as expeditiously as possible. The same things that -- I won't repeat it -- that Mr. Watson explained about the format and procedure. Mr. Watson or Ms. Hunt may lodge some objections to my questions, which is fine. We will take those up at a later time.</p> <p>And unless Ms. Hunt instructs you not to answer, you can go ahead and answer the question. Does that make sense?</p> <p>A. Yes.</p> <p>Q. Okay. You were asked earlier this morning by Mr. Watson a number of questions about some Compensation Equity Reports, and so the first thing I want to do is show you -- I'm going to share my screen here, and show you this report. Are you seeing this? Is this working well?</p> <p>A. Yes.</p> <p>Q. This is my first time doing this on Zoom, so please -- or on deposition, so let me know this is working well. Can you see this clearly?</p> <p>A. Yes.</p>

Janet Williams, M.D.

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<p style="text-align: right;">Page 6</p> <p>1 Q. Okay.</p> <p>2 MS. HILTON: And just for Mr. Watson and</p> <p>3 Ms. Hunt's purposes, this has been Bates Labeled</p> <p>4 Leykum_0001051.</p> <p>5 Q. (BY MS. HILTON) Dr. Williams, is this the</p> <p>6 Compensation Equity Report that you were referencing</p> <p>7 that was based on fiscal year 2015 data, but reported in</p> <p>8 April of 2016?</p> <p>9 A. Yes, it was.</p> <p>10 Q. Okay. And so, I just want to look at -- under</p> <p>11 the Background section it says, this last sentence here,</p> <p>12 "The Association of American Medical Colleges (AAMC),</p> <p>13 median salary data for biomedical specialty and faculty</p> <p>14 rank will benchmark the SOM data." Did I read that</p> <p>15 correctly?</p> <p>16 A. Yes.</p> <p>17 Q. And so, my question here is, in order to</p> <p>18 accurately compare salary to salary, we have to use this</p> <p>19 AAMC benchmark in order for that to be an accurate</p> <p>20 comparison; is that right?</p> <p>21 A. No.</p> <p>22 Q. Okay. How --</p> <p>23 A. The salaries at our Institution are compared</p> <p>24 with each other, but as an additional -- as a benchmark,</p> <p>25 it -- not to meet their standards, but did our salaries</p>	<p style="text-align: right;">Page 8</p> <p>1 we -- we match them for how you meet those data</p> <p>2 standards.</p> <p>3 Q. Okay. And, scrolling down here, under UTHSCSA</p> <p>4 SOM Methodology, the last sentence here says -- or</p> <p>5 pardon me, the second to last here says, "Annual</p> <p>6 Veterans' Administration (VA) compensation data were</p> <p>7 extracted from HCM job funding listings. Any annual VA</p> <p>8 compensation portion was added to the annual UT portion</p> <p>9 using the distinct compensation rates for each</p> <p>10 respective portion." Did I read that correctly?</p> <p>11 A. Yes.</p> <p>12 Q. And so, does this mean that you included VA</p> <p>13 compensation in this analysis?</p> <p>14 A. So, what we included was not the exact --</p> <p>15 because we don't actually get the exact compensation.</p> <p>16 We have the portion of their time that's committed to</p> <p>17 the VA. And so, they took the portion of the time, as</p> <p>18 listed in our job, you know, payroll listings, and --</p> <p>19 and put it toward what the annual UT portion was.</p> <p>20 Q. Okay. Okay. And so, is that what the next</p> <p>21 sentence is describing, that that's how you normalized</p> <p>22 it to a 1.0 full-time equivalent compensation --</p> <p>23 A. Right. Because we did include part-time</p> <p>24 faculty members, unless they were appointed -- which is</p> <p>25 very few -- less than one day's worth, 20 percent time.</p>
<p style="text-align: right;">Page 7</p> <p>1 fall with -- all fall within a 20 percent, actually,</p> <p>2 difference from those salaries. So, outliers were</p> <p>3 identified by saying, no, they are more than 20 percent</p> <p>4 of the median salary, nationally or regionally. But</p> <p>5 that's an additional benchmark. It wasn't -- It was a</p> <p>6 basis for us to compare our own salaries, not for us to</p> <p>7 compare them nationally.</p> <p>8 Q. Oh, thank you. Okay. I appreciate that</p> <p>9 explanation. Okay.</p> <p>10 And so, when it says here that -- that</p> <p>11 AAMC Median Salary Data for Biomedical Specialty and</p> <p>12 Faculty Rank will benchmark the SOM data, does that</p> <p>13 mean, then, based on what you're describing, that they</p> <p>14 would take, for instance, like, an oncologist's salary</p> <p>15 at UTHSCSA and compare it to the AAMC median for an</p> <p>16 oncology specialty?</p> <p>17 A. As to which perc- -- how close to the median is</p> <p>18 it. Is it within this 20 percent range.</p> <p>19 Q. And it's 20 percent of the median for that</p> <p>20 specialty?</p> <p>21 A. Either -- Either side of the median, yes. Yes.</p> <p>22 And for rank. They -- They also have rank and</p> <p>23 department -- your specialty, like you said, oncology --</p> <p>24 or also, if you're an MD in a clinical department or an</p> <p>25 MD in a basic science department or vice versa. So,</p>	<p style="text-align: right;">Page 9</p> <p>1 So, if you work 50 percent time, then we -- we prorated</p> <p>2 that, basically, normalized it to what would it be if</p> <p>3 you worked full-time.</p> <p>4 Q. I see. Okay.</p> <p>5 And why is it that you'd have to account</p> <p>6 for specialty when comparing salary data?</p> <p>7 A. Because specialties are paid different from</p> <p>8 each other.</p> <p>9 Q. And in this particular equity report you found</p> <p>10 no evidence of gender inequity, as it relates to salary;</p> <p>11 is that right?</p> <p>12 A. Right. There -- There were some inequities,</p> <p>13 but there -- or seeming inequities, differences, but</p> <p>14 they were not based on the gender of the person.</p> <p>15 Q. They were based on factors other than gender?</p> <p>16 A. Yes. I mean -- So, there's an example of a</p> <p>17 certain type of non-tenure track faculty that in a</p> <p>18 department just happened to be all men, and they were</p> <p>19 paid less. It wasn't because they were all men. They</p> <p>20 just happened to be all men. But it was that they</p> <p>21 needed some restitution for their salary. And -- And</p> <p>22 so, they're not gender based, per se.</p> <p>23 Q. Okay.</p> <p>24 A. They're based on other -- time, productivity,</p> <p>25 what- -- whatever else -- specialty -- whatever else</p>

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<p style="text-align: right;">Page 10</p> <p>1 makes up that salary standard.</p> <p>2 Q. And when you say "time," what are you referring</p> <p>3 to?</p> <p>4 A. Your -- H- -- What percent time you're</p> <p>5 appointed.</p> <p>6 Q. Okay.</p> <p>7 A. Could be what percent time you're assigned to</p> <p>8 certain duties, if those duties have more or less pay.</p> <p>9 So, one example of that would be anesthesiology has a</p> <p>10 system of paying people for their call coverage, and</p> <p>11 it's a known amount, it's a standard amount. So, if</p> <p>12 someone chooses not to take call coverage, they don't</p> <p>13 get that amount. So, that explains -- So, that came up,</p> <p>14 you know, wait a minute, why are these people making</p> <p>15 X amount less? It's be- -- And it's exactly the same</p> <p>16 amount. It's because they don't take any call. So --</p> <p>17 Q. Okay. That makes sense. That makes sense.</p> <p>18 I'm going to go ahead and close this one</p> <p>19 and show you -- You talked about a 2018 study.</p> <p>20 A. Yes.</p> <p>21 Q. And this document is titled 2018 LSOM Gender</p> <p>22 Pay Equity and Race-Hispanic Ethnicity Pay Equity</p> <p>23 Analyses. Is this the 2018 study that you were</p> <p>24 referring to earlier this morning?</p> <p>25 A. Yes.</p>	<p style="text-align: right;">Page 12</p> <p>1 the AAMC median salaries as the benchmark for this study</p> <p>2 as well, right?</p> <p>3 A. Right. And maybe that sentence below phrases</p> <p>4 it more easily understood. It's the external reference,</p> <p>5 and relative basis for comparison, and not a market</p> <p>6 comparison for salary adjustment.</p> <p>7 Q. Okay. And I'm going to scroll down here to</p> <p>8 this last bullet point on the first page. It says:</p> <p>9 "The salary used in this study is the Total Salary =</p> <p>10 X+Y+Z plus VA salary (when applicable)." Right?</p> <p>11 A. Yes.</p> <p>12 Q. And then, on the next page it says: "The --</p> <p>13 let's see if we can get them together here -- "The Total</p> <p>14 Salary definition used is the same definition used by</p> <p>15 the 2017 AAMC report of SOM Faculty Salaries in the</p> <p>16 United States Southern Region, so that comparisons made</p> <p>17 would be valid." Did I read that correctly?</p> <p>18 A. Yes.</p> <p>19 Q. And so, is this saying that the AAMC definition</p> <p>20 of Total Salary would include VA Salary, when</p> <p>21 applicable?</p> <p>22 A. Yes.</p> <p>23 Q. And -- And so, it's true, then, that the VA</p> <p>24 Salary was included when comparing for gender equity?</p> <p>25 A. Yes.</p>
<p style="text-align: right;">Page 11</p> <p>1 Q. Okay.</p> <p>2 A. That's the LSOM result that was then put into</p> <p>3 the other campus results to go to UT System.</p> <p>4 Q. Okay. All right.</p> <p>5 MS. HILTON: And for the -- for the</p> <p>6 record, and also for Counsel, this is Bates marked</p> <p>7 Leykum_001047. And I just put it down -- Actually, I'd</p> <p>8 like to mark the previous one as Defendant's Exhibit 1,</p> <p>9 and this one as Defendant's Exhibit 2. And I guess</p> <p>10 if -- Leesa, if you wouldn't mind helping me out with</p> <p>11 that. That is my first time to actually be the one</p> <p>12 offering exhibits via Zoom, and so if I need to do</p> <p>13 something on my end, would you please let me know if I</p> <p>14 need to do that now?</p> <p>15 THE COURT REPORTER: No, we're good.</p> <p>16 Thank you.</p> <p>17 MS. HILTON: Okay. Thank you.</p> <p>18 Q. (BY MS. HILTON) Alrighty. So, Dr. Williams,</p> <p>19 on this study, it makes reference to -- on this first</p> <p>20 paragraph here, it says: "A prior School of Medicine</p> <p>21 GPE analysis was conducted in 2016 using fiscal year</p> <p>22 2015 data, and no gender-based inequities were found."</p> <p>23 We already talked about that, right?</p> <p>24 A. Yes, ma'am.</p> <p>25 Q. And this is also -- This report you also use</p>	<p style="text-align: right;">Page 13</p> <p>1 Q. Okay. Dr. Williams, earlier this morning you</p> <p>2 were asked some questions about the Department of</p> <p>3 Medicine Compensation Plan. Do you remember those</p> <p>4 questions?</p> <p>5 A. Maybe.</p> <p>6 Q. Okay. Fair enough. Fair enough.</p> <p>7 So, is it true that you were not involved</p> <p>8 in the creation of that plan?</p> <p>9 A. That's correct.</p> <p>10 Q. Okay. And, actually, I'm looking through my</p> <p>11 notes here, and I -- I need to ask you a couple other</p> <p>12 questions about that 2018 report. I'm happy to bring it</p> <p>13 back up, if you want. But I believe you mentioned this</p> <p>14 earlier this morning. There were no gender inequities</p> <p>15 found that the report either, correct?</p> <p>16 A. That's correct.</p> <p>17 Q. And Division Chiefs were included in that</p> <p>18 analysis?</p> <p>19 A. Yes, they were.</p> <p>20 Q. All right. Is it true that you were not</p> <p>21 involved in the implementation of the Department of</p> <p>22 Medicine Compensation Plan?</p> <p>23 A. That's true.</p> <p>24 Q. And -- And you don't know when it was actually</p> <p>25 approved?</p>

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<p style="text-align: right;">Page 14</p> <p>1 A. No. All finance and compensation plans were, I</p> <p>2 would say, discussed and negotiated, at least to my</p> <p>3 impression, in the tight circle of the Dean and the Dean</p> <p>4 for Finance in the School of Medicine.</p> <p>5 Q. Okay.</p> <p>6 A. It was not part of my role, and isn't still.</p> <p>7 Q. Okay. So, you don't have any -- It's safe to</p> <p>8 say you don't have any personal knowledge of any of</p> <p>9 those discussions that took place?</p> <p>10 A. That's correct.</p> <p>11 Q. Okay. And you never read the plan?</p> <p>12 A. No. But I want to say they're all similar,</p> <p>13 somewhat, in that there's an X, which is the base, that</p> <p>14 is the same for all assistant professors. The Y, which</p> <p>15 is specialty based, and that is, like we talked about,</p> <p>16 differential, based on your special area. And the Z,</p> <p>17 which has to do with all the other components that you</p> <p>18 do. It could be productivity, incentive or reward, or</p> <p>19 it could be special leadership roles that you play.</p> <p>20 It's made of multiple components. So, they all have</p> <p>21 that. And that's the most I know about all the</p> <p>22 departments, other than someone else in leadership</p> <p>23 agreed to.</p> <p>24 Q. Are you familiar with the Department of</p> <p>25 Medicine Compensation Plan Division Chief's Addendum?</p>	<p style="text-align: right;">Page 16</p> <p>1 A. I -- Like I said, I was surprised, so it was</p> <p>2 large. But that's all I can say, because I'm not</p> <p>3 memorizing those forms.</p> <p>4 Q. And you don't know if that reduction was ever</p> <p>5 modified, do you?</p> <p>6 A. No, I don't.</p> <p>7 Q. And you weren't part of Dr. Leykum's appeal to</p> <p>8 the Compensation Committee?</p> <p>9 A. No.</p> <p>10 Q. You have never served on the Compensation</p> <p>11 Committee?</p> <p>12 A. No.</p> <p>13 Q. And you're not aware of where Dr. Leykum's</p> <p>14 salary fell in relation to the AAMC medians, are you?</p> <p>15 A. Not personally. I can make a guess, that --</p> <p>16 She was included in those two studies, so it would have</p> <p>17 been appropriate.</p> <p>18 Q. Okay.</p> <p>19 MS. HILTON: I'm going to object to</p> <p>20 nonresponsive to everything after "not personally."</p> <p>21 And, Dr. Williams, that's nothing personal against you,</p> <p>22 that's just -- just an objection to -- that the lawyers</p> <p>23 preserve for the court later on.</p> <p>24 THE WITNESS: Okay.</p> <p>25 MR. WATSON: I'm just going to -- Can I</p>
<p style="text-align: right;">Page 15</p> <p>1 A. No.</p> <p>2 Q. And I believe you said you know about</p> <p>3 Dr. Leykum's salary reduction because the form came</p> <p>4 across your desk for completeness; is that right?</p> <p>5 A. That's correct.</p> <p>6 Q. And what form --</p> <p>7 A. Yeah -- (interruption) all -- any change in</p> <p>8 faculty appointments of any aspect comes across my desk,</p> <p>9 to make sure it will be in the correct format and</p> <p>10 completion, so that the Dean and the Dean for Finance</p> <p>11 sign it. But I don't -- Unless they left something</p> <p>12 obviously blank or obviously incorrect, I don't ask for</p> <p>13 changes, I just notice.</p> <p>14 Q. Okay. And what -- Is there a title for that</p> <p>15 form? What form are you referring to?</p> <p>16 A. Yes, it's called The Faculty Change of</p> <p>17 Appointment Form.</p> <p>18 Q. Okay. Makes sense. Okay. All right.</p> <p>19 And so, you don't know the specifics of</p> <p>20 why her salary was reduced, right?</p> <p>21 A. No.</p> <p>22 Q. Or for what reasons it was reduced?</p> <p>23 A. No.</p> <p>24 Q. And sitting here today, you don't know the</p> <p>25 amount of that reduction, do you?</p>	<p style="text-align: right;">Page 17</p> <p>1 say something, Amy? We lost about a minute of testimony</p> <p>2 and questions. We got completely knocked off.</p> <p>3 MS. HILTON: Oh.</p> <p>4 MR. WATSON: So, could you just give me an</p> <p>5 idea what you asked, maybe? This is (interruption) --</p> <p>6 Zoom, right?</p> <p>7 MS. HILTON: Could we -- I mean, maybe we</p> <p>8 could have Ms. Parker read it back, if that would be</p> <p>9 helpful. Are y'all all back online now, Kyle?</p> <p>10 MR. WATSON: We're on, yeah. We -- But we</p> <p>11 lost 45 second to a minute.</p> <p>12 MS. HILTON: Okay.</p> <p>13 MR. WATSON: We -- We froze up and then</p> <p>14 got knocked off.</p> <p>15 MS. HILTON: What was the last question</p> <p>16 you heard, and then -- I mean, I'd be happy if</p> <p>17 Ms. Parker will oblige us, and have her -- she can read</p> <p>18 it back, if that will be helpful.</p> <p>19 MR. WATSON: It was about four questions</p> <p>20 after Division Chief's Addendum, and that she doesn't</p> <p>21 know whether or not Dr. Leykum's salary had been</p> <p>22 modified.</p> <p>23 MS. HILTON: Okay. Ms. Parker, would you</p> <p>24 mind reading it back for -- for Mr. Watson here, since</p> <p>25 we're having some tech issues?</p>

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<p style="text-align: right;">Page 18</p> <p>1 MR. WATSON: Leesa, you're --</p> <p>2 THE COURT REPORTER: Can we go off the</p> <p>3 record real quick?</p> <p>4 MS. HILTON: Sure.</p> <p>5 THE COURT REPORTER: So, it is 1:58 p.m.</p> <p>6 We're going off the record.</p> <p>7 (Off-the-record discussion.)</p> <p>8 (Requested portion was read.)</p> <p>9 THE COURT REPORTER: We are going to go</p> <p>10 back on the record now, and it is 1:59 p.m.</p> <p>11 Q. (BY MS. HILTON) Okay. Dr. Williams, I'm going</p> <p>12 to go back to where we were before we went off the</p> <p>13 record, real quick, just about the Department of</p> <p>14 Medicine Compensation Plan. You don't have any personal</p> <p>15 knowledge about how the compensation plan was applied to</p> <p>16 Division Chiefs in the Department of Medicine, do you?</p> <p>17 A. No, I don't.</p> <p>18 Q. And -- And you don't know whether or not that</p> <p>19 plan was applied uniformly to men and women?</p> <p>20 A. I don't know.</p> <p>21 Q. And you don't know whether there were any</p> <p>22 exceptions made for anyone?</p> <p>23 A. I don't know.</p> <p>24 Q. And you don't know whether there were men whose</p> <p>25 salaries were also reduced as part of the plan?</p>	<p style="text-align: right;">Page 20</p> <p>1 was only in my position as of mid 2011 -- the Dean had</p> <p>2 some guidelines and definitions of X, Y and Z, and then</p> <p>3 the leadership of each area needed to propose to him and</p> <p>4 the Dean of Finance -- probably, as part of their</p> <p>5 budgeting exercises -- how they were planning to meet</p> <p>6 this and -- in their departments or their unit.</p> <p>7 Q. Dr. Williams, you testified that you are not</p> <p>8 aware, personally, of where Dr. Leykum's salary fell in</p> <p>9 relation to AAMC median. And so, to the extent you have</p> <p>10 knowledge about Dr. Leykum's complaints about her</p> <p>11 salary, you know them because she told you about them,</p> <p>12 right?</p> <p>13 A. Not really. I know them because this form came</p> <p>14 across my desk, and it was quite surprising. And -- and</p> <p>15 then, I am involved in some Deans' meetings where I'm</p> <p>16 aware -- not in -- not it specifics, but generalities,</p> <p>17 that this negotiation was not satisfactory. But that's</p> <p>18 it. Dr. Leykum did not share details with me.</p> <p>19 Q. Okay. And so, your -- your basis of your</p> <p>20 knowledge for Dr. Leykum's complaints about her salary</p> <p>21 are the form that came across your desk, and then</p> <p>22 mention of it within a Deans' meeting?</p> <p>23 A. Yes. You know, leadership meetings, you know,</p> <p>24 things that happen.</p> <p>25 Q. All right.</p>
<p style="text-align: right;">Page 19</p> <p>1 A. No.</p> <p>2 Q. Or whether other women's salaries were</p> <p>3 increased?</p> <p>4 A. Don't know that.</p> <p>5 Q. And so, is it accurate to say that you don't</p> <p>6 have any personal knowledge about how the Department of</p> <p>7 Medicine Compensation Plan was approved or implemented?</p> <p>8 A. Right.</p> <p>9 Q. And you didn't have any part in drafting the</p> <p>10 Department of Medicine Compensation Plan?</p> <p>11 A. No.</p> <p>12 Q. And you don't have any personal knowledge of</p> <p>13 the specific processes with regard to approval of the</p> <p>14 Department of Medicine Compensation Plan by the</p> <p>15 University?</p> <p>16 A. No.</p> <p>17 Q. Okay. So, when you testified earlier this</p> <p>18 morning about the process for how a compensation plan is</p> <p>19 developed and implemented, you were talking about the</p> <p>20 process generally, not anything specific with regard to</p> <p>21 the Department of Medicine Compensation Plan?</p> <p>22 A. Correct. The -- All the departments were</p> <p>23 charged -- and presumably still are -- with the -- by</p> <p>24 the Dean, to develop the X, Y, Z Compensation Plan.</p> <p>25 And, at that time -- which was I'm sure regularly, but I</p>	<p style="text-align: right;">Page 21</p> <p>1 A. References. We'll just say references to that</p> <p>2 as opposed to -- I wasn't in any meeting that was</p> <p>3 specifically discussing her or her salary or</p> <p>4 negotiations.</p> <p>5 Q. And were those meetings -- I mean, were -- or</p> <p>6 what you heard, was it about any formal complaint that</p> <p>7 Dr. Leykum had lodged at the University?</p> <p>8 A. No.</p> <p>9 Q. And so, who did you hear make reference to</p> <p>10 Dr. Leykum's salary?</p> <p>11 A. I'm just saying, most likely, because I don't</p> <p>12 have any distinct memories of who, but every week</p> <p>13 there's a meeting of the Deans' cabinet, and that's the</p> <p>14 Dean, himself, and the various -- like myself, Vice</p> <p>15 Deans, Associate Deans -- to talk about our areas. And</p> <p>16 I am sure there was a reference in that discussion,</p> <p>17 probably between the -- the Dean or the Dean of Finance</p> <p>18 or the Dean for Clinical Services about changes being</p> <p>19 made.</p> <p>20 Q. Okay. And, ultimately, you don't know why her</p> <p>21 salary was reduced?</p> <p>22 A. No.</p> <p>23 Q. Or the basis for that decision?</p> <p>24 A. No, I don't. I mean, I do want to say that</p> <p>25 not -- not because of Dr. Leykum, but in the course of</p>

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<p style="text-align: right;">Page 22</p> <p>1 this form evolving, we do now have a justification space</p> <p>2 on the form.</p> <p>3 Q. Okay. Let's see here.</p> <p>4 MS. HILTON: I am going to -- and again,</p> <p>5 Dr. Williams, I'm going to object to that response --</p> <p>6 THE WITNESS: Okay.</p> <p>7 MS. HILTON: -- as nonresponsive. That's</p> <p>8 nothing personal to you, as I said before, it's just</p> <p>9 something that we have to preserve for the record.</p> <p>10 Q. (BY MS. HILTON) Okay. I am going to show you</p> <p>11 your affidavit, and it was previously marked, I believe,</p> <p>12 as Plaintiff's Exhibit 1. And I think -- I'm going to</p> <p>13 show you -- This will be Defendant's Exhibit 3.</p> <p>14 MS. HILTON: This is the Bates Labeled</p> <p>15 one, just for counsel's knowledge.</p> <p>16 Q. (BY MS. HILTON) I don't believe that the one</p> <p>17 that Kyle showed you earlier was Bates Labeled, but --</p> <p>18 Is this -- Do you recognize this document?</p> <p>19 A. Yes.</p> <p>20 Q. Okay. And -- And this is a copy of your</p> <p>21 affidavit?</p> <p>22 A. Yes.</p> <p>23 Q. Okay. Okay.</p> <p>24 MS. HILTON: We'll mark this as</p> <p>25 Defendant's Exhibit 3.</p>	<p style="text-align: right;">Page 24</p> <p>1 previously testified about participating in a commission</p> <p>2 under then Chancellor Cunningham; is that right?</p> <p>3 A. Yes.</p> <p>4 Q. Okay. And was that sworn testimony?</p> <p>5 A. No. It was -- I was one of two delegates from</p> <p>6 our campus. I was the faculty representative, and there</p> <p>7 was an administrative and professional staff</p> <p>8 representative. Each campus was asked to nominate two</p> <p>9 representatives, and we participated in a series of, at</p> <p>10 that time, on site in Austin, discussions and</p> <p>11 subcommittee work. But that's not sworn.</p> <p>12 Q. Okay. And you also said that you -- earlier</p> <p>13 this morning I believe you testified that you had</p> <p>14 provided written testimony that has to do with gender</p> <p>15 equity studies. Were you referencing the reports that</p> <p>16 we previously marked as Defendant's Exhibits 1 and 2?</p> <p>17 A. Yes, ma'am.</p> <p>18 Q. Okay. Were there any other gender equity</p> <p>19 studies or any other written testimony that you were</p> <p>20 referring to?</p> <p>21 A. Way back in -- when there were floppy disks, in</p> <p>22 the '80s, I was asked to participate with -- as the</p> <p>23 President of the Women's Faculty Association, and</p> <p>24 Clinical Faculty, along with a leader in the Nursing</p> <p>25 School, and a leader in the Graduate Biomedical Sciences</p>
<p style="text-align: right;">Page 23</p> <p>1 Q. (BY MS. HILTON) Let's see. Dr. Williams, did</p> <p>2 you write this affidavit?</p> <p>3 A. Yes.</p> <p>4 Q. Is there any part of it that you didn't write?</p> <p>5 A. No.</p> <p>6 Q. Did you receive a draft from any of</p> <p>7 Dr. Leykum's attorneys?</p> <p>8 A. Yes, to make it in the correct form to be an</p> <p>9 affidavit.</p> <p>10 Q. And do you still have copies of that draft or</p> <p>11 any other draft that may exist?</p> <p>12 A. No. Or -- or yes, but it looks just like that.</p> <p>13 I mean, it didn't change. It looks just like that,</p> <p>14 without the "County of Bexar" and whatever, you know.</p> <p>15 Q. Okay. And was any of this language included in</p> <p>16 that draft?</p> <p>17 A. Yes, it's the same language.</p> <p>18 Q. Okay. So, did you make any edits to the draft</p> <p>19 that they sent you?</p> <p>20 A. Not that I recall.</p> <p>21 Q. Okay. All right. On the first page of this</p> <p>22 affidavit you say: "Over my years as a faculty member</p> <p>23 rising into leadership, I have provided written and oral</p> <p>24 testimony on the campus, UT System and national levels</p> <p>25 about the status of women in biomedical sciences." You</p>	<p style="text-align: right;">Page 25</p> <p>1 Ph.D. School, to write national testimony for a</p> <p>2 commission on the recruitment, retention, re-entry, and</p> <p>3 advancement of women in the biomedical sciences. And</p> <p>4 that was written, and I did not -- They had so many</p> <p>5 people that wanted to do oral testimony. It went way</p> <p>6 late, and I did not provide oral testimony to that.</p> <p>7 Q. Okay.</p> <p>8 A. It was in Washington, D.C., through the, at</p> <p>9 that time, Center for Women Sciences, I think, something</p> <p>10 like that, or the NIH.</p> <p>11 Q. So, in your affidavit here, when you're</p> <p>12 describing written and oral testimony, you're not</p> <p>13 referring to sworn testimony; is that right?</p> <p>14 A. No. No.</p> <p>15 Q. And I believe you said you'd never been deposed</p> <p>16 prior to today; is that right?</p> <p>17 A. That's correct.</p> <p>18 Q. And have you ever testified in court as an</p> <p>19 expert witness before?</p> <p>20 A. I think I have, a long time ago, but I can't</p> <p>21 recall.</p> <p>22 Q. What was the case about?</p> <p>23 A. It would have been a child mistreat- --</p> <p>24 mistreatment case.</p> <p>25 Q. Okay. And so, if you had provided testimony in</p>

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<p style="text-align: right;">Page 26</p> <p>1 that case, it would have been related to your -- to your</p> <p>2 specialty as a pediatrician?</p> <p>3 A. That's correct.</p> <p>4 Q. Do you recall what state or court that</p> <p>5 proceeding took place in?</p> <p>6 A. I -- Yeah, it's Illinois, and it was -- Well,</p> <p>7 now I can think of one, and gosh that had to have been</p> <p>8 in the, I guess, 1979-80 -- '82. Illinois. I have no</p> <p>9 idea what court.</p> <p>10 Q. Okay. All right. If you'll just give me a</p> <p>11 minute to look at my notes here for a sec.</p> <p>12 Okay. Dr. Williams, your -- your source</p> <p>13 of knowledge about salary inequities is from doing these</p> <p>14 gender equity reports; is that right?</p> <p>15 A. Partially. Gender equity reports, and then</p> <p>16 having a viewing of thousands of salaries, and ref- --</p> <p>17 referencing the AAMC, and -- and, at times, questioning</p> <p>18 the departments, usually on new appointments and</p> <p>19 visa-related foreign national appointments, where we</p> <p>20 have to make sure we're being fair.</p> <p>21 Q. Okay. And you're talking about visa-related</p> <p>22 for national appointments, and you were talking -- and</p> <p>23 that's in rel- --</p> <p>24 A. Foreign nationals. Foreign nationals.</p> <p>25 Q. Okay.</p>	<p style="text-align: right;">Page 28</p> <p>1 MS. HILTON: So, if we could just go off</p> <p>2 the record for a few minutes, please.</p> <p>3 THE WITNESS: Like, 10 minutes or --</p> <p>4 MS. HILTON: Yeah, 10 minutes would be</p> <p>5 great.</p> <p>6 THE WITNESS: Thank you.</p> <p>7 THE COURT REPORTER: It is 2:18 p.m.</p> <p>8 We're off the record.</p> <p>9 (A recess was taken from 2:18 to 2:33.)</p> <p>10 THE COURT REPORTER: It is 2:33 p.m. and</p> <p>11 we're going back on the record.</p> <p>12 Q. (BY MS. HILTON) Dr. Williams, thanks for your</p> <p>13 time today. I just have just a couple more questions</p> <p>14 for you.</p> <p>15 Have you ever provided expert testimony,</p> <p>16 regarding gender pay equity, in a lawsuit?</p> <p>17 A. No.</p> <p>18 Q. And have you agreed to testify as an expert for</p> <p>19 Dr. Leykum in this lawsuit?</p> <p>20 A. No.</p> <p>21 MS. HILTON: I pass the Witness.</p> <p>22 EXAMINATION</p> <p>23 BY MR. WATSON:</p> <p>24 Q. I just got a couple more questions. I need to</p> <p>25 clarify -- either my hearing, which may need clarified,</p>
<p style="text-align: right;">Page 27</p> <p>1 A. You need to have the actual and prevailing</p> <p>2 work-related salaries to be respected, and I'm competent</p> <p>3 in hiring foreign nationals. And initial appointments,</p> <p>4 those all come across my desk. I'm all -- am</p> <p>5 increasingly very much a part of that, and so I'm aware</p> <p>6 of what might not -- you know, something I might want to</p> <p>7 question.</p> <p>8 Q. Okay. Well, let's see. Let me take a look</p> <p>9 here. Dr. Williams, are there -- are you providing any</p> <p>10 opinions -- Well, let me back up.</p> <p>11 When you have a question about whether a</p> <p>12 salary is fair, do you raise those with the hiring</p> <p>13 department?</p> <p>14 A. Yes.</p> <p>15 Q. Okay. And do they resolve it?</p> <p>16 A. Well, I have to trust that they resolve it,</p> <p>17 that -- I'm not the final decision maker.</p> <p>18 Q. Okay.</p> <p>19 A. And if it's presented in a way that can be</p> <p>20 justified against a benchmark or, you know, the rest of</p> <p>21 the department or similar circumstances, yes, that's</p> <p>22 what I want to hear.</p> <p>23 Q. Okay. Let's take a short break. I just want</p> <p>24 to go through my notes and make sure I've asked</p> <p>25 everything I need to ask you.</p>	<p style="text-align: right;">Page 29</p> <p>1 according to my wife, or what I think a couple of</p> <p>2 answers were, in connection with the affidavit.</p> <p>3 Who drafted the affidavit, Janet?</p> <p>4 A. So, I drafted it in combination with you.</p> <p>5 Q. Okay. Did I include any of the language in</p> <p>6 your affidavit, other than the legal niceties to make it</p> <p>7 an affidavit?</p> <p>8 A. No.</p> <p>9 Q. Okay. Because -- And I appreciate that,</p> <p>10 because not only would I not have knowledge of what</p> <p>11 you've included in here, but what I heard was that we</p> <p>12 sent you a draft, and you didn't do anything to edit</p> <p>13 that draft. I think that's what I heard. And it's --</p> <p>14 it's real important to me that the jury understands that</p> <p>15 other than the legal niceties with respect to your name</p> <p>16 and age and the notary form, you were the author of this</p> <p>17 affidavit?</p> <p>18 A. That's correct.</p> <p>19 Q. Okay. The only other thing I want to ask you</p> <p>20 about is the question by Ms. Hilton, as it relates to</p> <p>21 you don't have any knowledge of other division --</p> <p>22 Division Chiefs' salaries also being reduced. Do you</p> <p>23 remember that discussion?</p> <p>24 A. Yes. That she asked me that, yes.</p> <p>25 Q. Okay. And I believe that you had indicated</p>

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<div>Page 30</div> <div>1 that you weren't aware.</div> <div>2 A. That's correct. I -- I don't -- If something</div> <div>3 comes across my desk, I am looking at it for technical</div> <div>4 correctness, and I'm not going back to the department to</div> <div>5 compare who did or did not --</div> <div>6 Q. Okay.</div> <div>7 A. -- receive salary changes.</div> <div>8 Q. But there was something about Luci's that</div> <div>9 triggered your attention?</div> <div>10 A. Right.</div> <div>11 Q. And that was because of the -- as you</div> <div>12 explained, the substantial reduction, in light of her</div> <div>13 performance, basically?</div> <div>14 A. Yes. Luci had served in an Assistant or</div> <div>15 Associate Clinical Dean role. She was very involved in</div> <div>16 the Deans' office. As a woman in medicine, I know of</div> <div>17 her. She's very involved in supporting both men and</div> <div>18 women in medicine, and particularly her division. And</div> <div>19 I'm aware of what people are doing, because career</div> <div>20 development is part of my purview. And I am aware --</div> <div>21 was aware of her successes in multiple areas. So, since</div> <div>22 I had a basis for knowing her productivity and high</div> <div>23 regard, I -- then it came to my attention, more readily</div> <div>24 than others, that I may not know them, in that, oh, this</div> <div>25 is surprising. But I didn't ask, because of her</div>																									<div>Page 32</div> <div>1 THE COURT REPORTER: Yes. Okay. Thank</div> <div>2 you. It is 2:39 p.m., and we're going off the record.</div> <div>3 (Deposition concluded.)</div> <div>4 * * * * *</div> <div>5</div> <div>6</div> <div>7</div> <div>8</div> <div>9</div> <div>10</div> <div>11</div> <div>12</div> <div>13</div> <div>14</div> <div>15</div> <div>16</div> <div>17</div> <div>18</div> <div>19</div> <div>20</div> <div>21</div> <div>22</div> <div>23</div> <div>24</div> <div>25</div>																								
<div>Page 31</div> <div>1 leadership role, what that was based on. I was just</div> <div>2 surprised.</div> <div>3 Q. And subsequent to that surprise, and subsequent</div> <div>4 to that salary reduction, there had been a change in the</div> <div>5 forms that now require a justification and an</div> <div>6 explanation for the reduction; is that right?</div> <div>7 A. I don't know about the timing of it, but</div> <div>8 we're -- we've gone through a series of improvements in</div> <div>9 our forms, to include a justification, so that it's very</div> <div>10 clear. And it's more important to this current</div> <div>11 administration than previously.</div> <div>12 Q. All right. Again, thank you. I don't have</div> <div>13 anything further. Appreciate it.</div> <div>14 MS. HILTON: No further questions. Thank</div> <div>15 you, Dr. Williams.</div> <div>16 THE WITNESS: Thank you.</div> <div>17 MR. WATSON: Have a good day.</div> <div>18 THE WITNESS: Thank you.</div> <div>19 THE COURT REPORTER: Okay. Mr. Watson,</div> <div>20 did you want a copy of this deposition?</div> <div>21 MR. WATSON: I do, Leesa.</div> <div>22 THE COURT REPORTER: And, Ms. Hunt, did</div> <div>23 you want a copy of this deposition?</div> <div>24 MS. HUNT: Yes. Not to purchase, but for</div> <div>25 an opportunity for the Witness to review.</div>																									<div>Page 33</div> <div>1 CHANGES AND SIGNATURE</div> <div>2 RE: LUCI LEYKUM, M.D. VS. THE UNIVERSITY OF TEXAS</div> <div>3 HEALTH SCIENCE CENTER AT SAN ANTONIO</div> <div>4</div> <div>5</div> <div>6</div> <div>7</div> <div>8</div> <div>9</div> <div>10</div> <div>11</div> <div>12 I, JANET WILLIAMS, M.D., have read the</div> <div>13 foregoing deposition and hereby affix my signature that</div> <div>14 same is true and correct, except as noted above.</div> <div>15</div> <div>16 JANET WILLIAMS, M.D., Witness</div> <div>17</div> <div>18 THE STATE OF _____)</div> <div>19 COUNTY OF _____)</div> <div>20</div> <div>21 Before me, _____, on this day</div> <div>22 personally appeared JANET WILLIAMS, M.D., known to me</div> <div>23 (or proved to me under oath or through _____)</div> <div>24 (description of identity card or other document) to be</div> <div>25 the person whose name is subscribed to the foregoing</div> <div>instrument and acknowledged to me that they executed the</div> <div>same for the purposes and consideration therein</div> <div>expressed.</div> <div>Given under my hand and seal of office this</div> <div>_____ day of _____, _____.</div> <div>Notary Public in and for the</div> <div>State of _____.</div>																								


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1 IN THE UNITED STATES DISTRICT COURT
2 FOR THE WESTERN DISTRICT OF TEXAS
3 SAN ANTONIO DIVISION
4 LUCI LEYKUM, M.D.,)
5)
6 Plaintiff(s))
7) CIVIL ACTION
8 VS.) NO. 5:20-cv-00478-OLG
9)
10 THE UNIVERSITY OF TEXAS)
11 HEALTH SCIENCE CENTER AT)
12 SAN ANTONIO,)
13)
14 Defendant(s))
15 CERTIFICATE FROM THE
16 ORAL/VIDEO CONFERENCE DEPOSITION OF
17 JANET WILLIAMS, M.D.
18
19 April 28, 2021
20
21 I, LEESA L. PARKER, a Certified Shorthand
22 Reporter in and for the State of Texas, hereby certify
23 to the following:
24 That the Witness, JANET WILLIAMS, M.D., was
25 duly sworn by the officer and that the transcript of the
oral deposition is a true record of the testimony given
by the Witness.
I further certify that pursuant to FRCP Rule 30
(f)(1) that the signature of the Deponent:
__X__ was requested by the Deponent or a party
before the completion of the deposition and is to be
returned within 30 days from date of receipt of the
transcript.

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1 If returned, the attached Changes and Signature
2 Page contains any changes and the reasons therefor;
3 ____ was not requested by the Deponent or a
4 party before the completion of the deposition.
5 I further certify that I am neither attorney,
6 nor counsel for, related to, nor employed by any of the
7 parties to the action in which this testimony is taken.
8 Further, I am not a relative or employee of any attorney
9 of record in this cause, nor do I have a financial
10 interest in the action.
11 Certified to by me this ____ day of
12 _____, 2021.
13
14 
15 LEESA L. PARKER, Texas CSR 5343
16 Expiration Date: 07/31/2022
KIM TINDALL & ASSOCIATES, LLC
Firm Registration No. 631
(210) 697-3400
17
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Faculty Compensation Equity Final Report

UTHSCSA School of Medicine

April 2016

BACKGROUND

- September 2015: The UTHSCSA School of Medicine (SOM) instituted a plan to analyze FY2015 faculty compensation data toward achieving gender compensation equity. The Association of American Medical Colleges (AAMC) median salary data for biomedical specialty and faculty rank will benchmark the SOM data.
- Fall 2015: The University of Texas System (UTS) Chancellor charged all UTS Presidents' to ensure their respective campus instituted a faculty compensation equity plan so that in three years maximum, compensation equity will have become the norm.
- **UTHSCSA SOM Methodology:** A Senior Financial Analyst in the SOM Dean's Office working in conjunction with the SOM Dean's Offices of Finance and Faculty Life prepared a FY15 faculty compensation profile from Human Capital Management (HCM) data for each of the 26 SOM departments (8 Basic Science, 18 Clinical Science departments). Payroll data were gathered from FY15 GL-posted periods. Annual Veterans' Administration (VA) compensation data were extracted from HCM job funding listings. Any annual VA compensation portion was added to the annual UT portion using the distinct compensation rates for each respective portion. UT payroll data were annualized based on paid months and normalized to 1.0 FTE compensation.
 - Total compensation, including the 'Z' component (incentive) was used.
 - Inclusions: Faculty members on any track with any of the following title ranks - Assistant Professor, Associate Professor, Professor.
 - Exclusions:
 - Deans, Center Directors, Institute Directors, Chairs and Division Chiefs.
 - One-time awards or payments, such as reimbursement for relocation expenses.
 - Visiting Faculty, Faculty Associate and Specialist titles. There is no comparison benchmarking.
 - Adjunct without pay faculty titles.
 - Instructor titles. This area of the SOM dataset has a very diverse composition and the AAMC does not benchmark.
 - Faculty with total payroll full-time equivalency (FTE) less than 20% (were considered 'prn faculty'.)
 - Benchmark values were the median total faculty compensation values in the most recently available (2013-2014) *AAMC Faculty Compensation Data Report for U.S. Medical Schools*, reporting total faculty compensation by department and some subspecialties.
 - M.D. faculty in clinical departments: Medical School Faculty Compensation for All Schools M.D. or Equivalent Degree, Clinical Science Departments/Specialties (Table 11).
 - Ph.D. faculty in clinical departments: Medical School Faculty Compensation for All Schools Ph.D. or Other Doctoral Degree, Clinical Science Departments/Specialties (Table 25).

- Faculty in basic science departments, excluding Pathology: Medical School Faculty Compensation for Southern Region Ph.D. or Other Doctoral Degree, Basic Science Departments/Specialties (Table 22).
 - Pathology research faculty: Medical School Faculty Compensation for Southern Region Ph.D. or Other Doctoral Degree, Clinical Science Departments/Specialties (Table 29).
 - Pathology clinical faculty: Medical School Faculty Compensation for All Schools M.D. or Equivalent Degree, Clinical Science Departments/Specialties (Table 11).
 - AAMC data are listed by specialty and degree but not track (tenure).
 - Some subspecialties are included, but not all have identified compensation percentiles separate from the base specialty values.
 - The AAMC benchmark was provided as a basis for comparing faculty compensation within a department, the SOM and nationally, and not necessarily as the compensation goal to match. It was understood that SOM faculty compensation goals are developed and vetted by department, using an appropriately selected national standard for the field.
- **Data Expression:** a sort-able Excel spreadsheet listing each faculty member by name, degree, title rank, track/tenure status, FTE, years in rank, gender, total compensation and percent of AAMC median benchmark compensation for type of doctoral degree in a specific basic science or clinical science department; a scatter plot displaying individual faculty members by gender and years in rank plotted against the percentage of AAMC benchmark median compensation; and a first try at bubble graphs to display individual faculty members by rank, gender and years in rank against the percentage of AAMC benchmark median compensation.
 - The Excel spreadsheet coding: NOT = Not Tenured not on Track (= Non-Tenure Track), NTK = Not Tenured on Tenure Track (= Tenure Track), TEN = Has Tenure.
 - Departments were asked to review their respective data, work with the SOM Senior Financial Analyst to make data and graph corrections, note on the Excel spreadsheet the explanations for outliers and discrepancies, and complete a brief analysis summary to discuss with the SOM Associate Dean for Faculty and the SOM Dean before developing an action plan toward eliminating discrepancies and ensuring faculty compensation gender equity.
 - The intent was to identify SOM department faculty compensation discrepancies, best practices and any actions to be taken.
 - Departments were asked to remind faculty to update their race/ethnicity, disability and veteran status information at the recently updated confidential Human Resources site, so that these data would assist the SOM in responding to future data analysis and diversity inquiries, and meeting accreditation and funding stipulations related to faculty and diversity priorities.

SOM FACULTY COMPENSATION ANALYSIS FINAL STATUS REPORT TEMPLATE***Fiscal Year 2015 Faculty Compensation Analysis - Status Report******SOM Department of _____*****GENERAL REPORTING:**

- *In the Faculty Compensation spreadsheet 'Comments' column to the far right, **BRIEFLY EXPLAIN** each faculty member's compensation listed as above 100% of the Median BM, such as faculty member 'inherited' with compensation that was 'set' in prior department; market rate for recruitment or for retention; rank, track or role-related explanation; VA or other contract augments; included one-time award or new faculty moving expense and when corrected, is at 75th percentile; etc.*
- ***BRIEFLY EXPLAIN** each faculty member's compensation falling lowest in the department, generally those at or below 80% of the AAMC Median BM. Also use qualifiers such as rank, track or role-related explanation; VA or other contract determines salary; etc.*
- ***BRIEFLY EXPLAIN** any faculty compensation listed to provide additional clarity. Each faculty member in smaller departments may warrant individual commentary.*

GENDER REPORT: *Select one of the choices below, and **provide commentary**.*_____ *Compensation of women faculty in this department showed **NO gender-related** discrepancies.*_____ *Compensation of women faculty in this department showed the following **gender-related** discrepancies and our **remediation plan** is:***BRIEF CONCLUSIONS FROM THIS ANALYSIS:**

1.

DEPARTMENT'S FACULTY COMPENSATION GOALS RESULTING FROM THIS ANALYSIS:

1.

SOM FACULTY COMPENSATION ANALYSIS FINAL STATUS REPORT SUMMARY

- **Eight departments** – 4 Clinical Science, 4 Basic Science – had potential gender-related faculty compensation discrepancies among the faculty members with compensation in the lowest percentiles (generally below the 80th percentile).
 - **Four Departments:** 1 Clinical Science, 3 Basic Science – showed a distinct gender predominance in the faculty below a certain compensation benchmark percentile:
 - Dept. A: 3 women/6 men below 80th percentile with the compensation of the 3 women and 1 man (all with tenure) explained by low productivity; 5 of the men were on research track without independent research funding, so were mentor-funding dependent.
 - Dept. B: 11 women/2 men below the 95th percentile with the lowest two (1 man, 1 women) identified with low productivity. (0 woman/7 men were above the 95th.) The gender 'boundary' in compensation was predominantly explained by faculty generalist versus subspecialist clinical focus. Two men had (high) market rate recruitment salaries; 5 men had compensation that should have been excluded, such as one-time reimbursement for moving expenses.

- Dept. C: 6 women/1 man below 80th percentile. Five women and 1 man were on non-tenure research track without independent research funding, so were mentor-funding dependent. (1 woman with tenure - low productivity explanation.)
 - Dept. D: 2 women/1 man (with tenure) below 80th percentile. The man's salary was related to low research productivity. The women were the only 2 faculty members in this department (that otherwise has a ratio of 1:4 women to men) who were not on tenure track or with tenure, i.e. they were on research track without independent research funding, so were mentor-funding dependent.
- **Four Departments:** 3 Clinical Science, 1 Basic Science – did not show a definite causal gender-relationship in the faculty compensation below a certain benchmark percentile.
 - Dept. E: 2 women/3 men in the lowest salary range between 80-88th percentile. One woman and 2 men (one with tenure) had salaries related to low productivity. One woman/1 man had salaries determined by regional campus location.
 - Dept. F: 2 women/3 men below 80th percentile. All salaries related to lower productivity. One woman/1 man (with tenure) related to temporary personal/family reduction in role. One woman/1 man (with tenure) with lower research productivity.
 - Dept. G: 2 women below 80th percentile explained by faculty generalist versus subspecialist clinical focus.
 - Dept. H: 3 women/2 men below 75th percentile. Two PhD women (one with tenure) had low research productivity. One man had salary determined by regional campus location. One woman and 1 man were productive subspecialty clinicians in areas of lower reimbursement for services.
- **Data points BELOW the benchmark or departmental median** were explained as follows:
 - The faculty member's productivity was below (and often had been recognized as staying below) the department/SOM productivity expectations/standards for rank and track in comparison to the department's current XYZ Compensation Plan.
 - Departments used lower salary standards for Non-Tenure track faculty compared with Tenure Track faculty members or those with Tenure. In particular, the lower standard was applied to Non-Tenure Track/Research faculty members who had no independent funding and were reliant upon the salary funding available from mentor's grant funding. Depending on the department, the research track faculty compensation showed a gender-related discrepancy regarding who was more likely appointed/working in a research track position in that department.
- **Data points ABOVE the benchmark or departmental median** were all explained as follows:
 - Market rate recruitment or retention packages.
 - Added pay generated by additional on-call or Emergency Department shift work.
 - The compensation was not corrected for such as serving as Chief or Director, an A&P role with an associated augmentation, or a higher salary base for a VA portion of the salary.

- A faculty member with a compensation profile established in and ‘inherited’ from another department or regional campus location, or from a salary situation occurring prior to the current Chair/department.
- **Compensation Analysis next steps:**
 - Departments are budgeting for a FY17 correction of compensation discrepancies found in order to align compensation with departmental XYZ compensation plans and productivity independent of appointment track.
 - Annual SOM compensation analysis will be conducted with similar methodology, improved as follows:
 - Continue to exclude faculty groups difficult to benchmark as well as the SOM Dean, Vice Deans, Chairs.
 - Include and correct for leadership augmentation (A&P, Director, etc.)
 - Include and correct for VA compensation rates relative to the AAMC benchmark.
 - Use a data plot program that will also express faculty rank.
 - Explore race/ethnicity data for future inclusion.

2018 LSOM Gender Pay Equity and Race/Hispanic Ethnicity Pay Equity Analyses

This Spring, the LSOM Office for Faculty began to build a database for a Gender Pay Equity (GPE) Study to fulfill the UTS Chancellor's mandate that in 2018, system components begin to conduct an annual GPE analysis with the additional recommendation to add race/ethnicity into the analysis as soon as possible. A prior School of Medicine GPE analysis was conducted in 2016 using fiscal year 2015 data, and no gender-based inequities were found.

The compiled LSOM data set was analyzed for Total LSOM results and for separate Basic Science Department and Clinical Department results, while also considering Tenure/Tenure Track (TT) versus Non-Tenure Track appointment, degree and departmental assignment (PhD or MD or equivalency) in a Clinical or Basic Science Department.

Median salaries (and percentiles) in the 2017 AAMC Report of SOM Faculty Salaries in the US Southern Region specific to M.D. and Ph.D. (or equivalent) provided external standards and relative benchmarking for the analyses conducted in regard to gender, and separately in regard to race/Hispanic ethnicity. In the 2016 study, this AAMC faculty salary report also supplied the external reference and relative basis for salary comparisons by gender, but it was not employed as a market comparison in order to make salary adjustments.

Standards for the current study:

- All data were extracted from our institution's HCM data after all LSOM faculty members had the opportunity to update and verify their HCM data profiles, including gender, race, Hispanic ethnicity, veteran status and disability status.
- Each Department Chair and Administrator confirmed the respective department's FY2017 salary data.
- Reporting includes 27 LSOM departments, comprised of 7 Basic Science and 20 Clinical Departments. Pathology was counted among the LSOM Clinical Departments. The Medical Education Department was excluded, since it was formed after FY2017.
- Note: Although LSOM faculty race/Hispanic ethnicity data were updated, these data continue to be stored in HCM as an 'either/or' option so that any race indicated becomes listed preferentially and excludes Hispanic ethnicity. Only when Hispanic ethnicity is selected alone does it appear, thus potentially lowering the Hispanic ethnicity count.
 - For Race/Hispanic Ethnicity analysis, faculty were categorized as Asian, White, or URM (Under-Represented Minority). The URM category aggregated all faculty members who indicated either Black race or Hispanic ethnicity.
- The salary used in this study is the Total Salary = X+Y+Z plus VA salary (when applicable).
 - One-time awards or payments, such as moving expenses, were excluded.
 - Actual salary dollars independent of source, such as provided by another UT Health SA school, comprised the Total Salary.
 - Any designated Administrative and Professional (A&P) salary was excluded.

- The Total Salary definition used is the same definition used by the 2017 AAMC Report of SOM Faculty Salaries in the United States Southern Region, so that comparisons made would be valid.
 - In this comparison, the Department of Epidemiology and Biostatistics (DEB) Ph.D. faculty comparable was AAMC Biomedical Informatics faculty; DEB M.D. faculty comparable, AAMC Biostatistics.

Inclusion:

- All faculty members having:
 - one of the LSOM Departments as the appointing Academic Home.
 - one of the faculty titles that includes the word(s), 'Assistant Professor, Associate Professor, Professor,' or is an equivalent title in the Lecturer series of titles (Lecturer III, Senior Lecturer, Distinguished Senior Lecturer).
 - Full-time and Part-time faculty members with an identifiable faculty salary portion of 20% or more.
- An annualized total LSOM faculty salary (in order to include eligible part-time faculty).
- Time in rank as calculated from HCM records.

Exclusion:

- Faculty categories of Adjunct (whether volunteer or paid), Adjoint (paid by another institution), Return to work retiree.
- Faculty categories lacking a standard national definition or external reference standard for salary: Lecturer I & II, Instructor, Specialist, Faculty Associate.
- Those with an LSOM Academic Home faculty appointment percentage below 20%; thus, Dean titles with an A&P portion above 80%.
- The LSOM Dean. Department Chairs, Center Directors, Institute Directors.

GPE and Race/Hispanic Ethnicity Pay Equity Analyses: See AAMC Median Table.

- A total of 790 LSOM faculty members met the inclusion criteria: 327 women, 463 men.
 - Clinical Departments (CD) – 660 faculty members: 286 Women, 374 Men
 - Basic Science Departments (BSD) – 130 faculty members: 41 Women, 89 Men
- Analysis was conducted on data from the BSD as a cluster, the CD as a cluster, then combined into All LSOM Departments.
- Data on gender and URM were analyzed separately for Tenure/TT and Non-Tenure Track within a BSD or CD cluster, then overall LSOM totals calculated.
- AAMC Median GPE and URM Tables: The number of faculty members with a salary below the AAMC median.
 - **Gender:** BSD - The overall percentage of females with salaries below the AAMC median is the same (46%) as the overall percentage of males with salaries below the AAMC median (46%), i.e., no gender bias.
 - **Gender:** CD - The overall percentage of females with salaries below the AAMC median is higher (80%) than the overall percentage of males with salaries below the AAMC median (68%), i.e., possible gender bias.

- **URM:** BSD - The overall percentage of URM with salaries below the AAMC median (20%) is lower, than the corresponding percentages for whites and Asians (50% and 43%, respectively).
- **URM:** CD - The overall percentage of URM with salaries below the AAMC median (75%) is between the corresponding percentages for whites and Asians (72 % and 80%, respectively).

Conclusions and Next Steps:

- Initial regression analysis did not show time in rank to be predictive of salary differences.
- The BSD were not shown to have faculty salary differences related to gender or URM.
- In the CD, salary differences are explained by faculty roles, responsibilities and productivity measures irrespective of gender. No salary differences are attributable to race or URM status.

Market Comparisons: See AAMC 25th Perc Table.

- Each department was reviewed to identify the number of faculty members with salaries below the AAMC Southern Region 25th percentile in order to discern those with very low salaries.
 - Basic Science Departments (BSD):
 - The number of BSD faculty members with salaries below the 25th AAMC percentile: 38 of the total BSD faculty (i.e., 130, thus 29%) have salaries below the 25th AAMC percentile.
 - To raise salaries to exactly the 25th percentile for these 38 persons would require \$597,869. To raise the salary to the 75th AAMC percentile would require \$2,052,869.
 - Clinical Departments (CD):
 - The number of CD faculty members with salaries below the 25th AAMC percentile: 305 of the total CD faculty (i.e., 660, thus 46%) have salaries below the 25th AAMC percentile.
 - To raise salaries to exactly the 25th percentile for these 305 persons would require \$11,444,383. To raise the salary to the 75th AAMC percentile would require \$37,649,383.